

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N09000003220

FILED  
May 01, 2010  
Secretary of State

**Entity Name:** CONNECTING GOD'S CHILDREN, INC.

**Current Principal Place of Business:**

3693 JERICO DRIVE  
CASSELBERRY, FL 32707

**New Principal Place of Business:**

**Current Mailing Address:**

3693 JERICO DRIVE  
CASSELBERRY, FL 32707

**New Mailing Address:**

**FEI Number:** 26-4641662      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

**Name and Address of Current Registered Agent:**

**Name and Address of New Registered Agent:**

BELL, SHERI S  
3693 JERICO DRIVE  
CASSELBERRY, FL 32707      US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

**Title:** D  
**Name:** BELL, SHERI S  
**Address:** 3693 JERICO DRIVE  
**City-St-Zip:** CASSELBERRY, FL 32707

**Title:** D  
**Name:** CROFT-CROSSLAND, CHRIS  
**Address:** 876 CHOKECHERRY DRIVE  
**City-St-Zip:** WINTER SPRINGS, FL 32708

**Title:** D  
**Name:** HAWKINS, KATHLEEN  
**Address:** 1534 MYRTLE LAKE HILLS ROAD  
**City-St-Zip:** LONGWOOD, FL 32750

**Title:** D  
**Name:** KNIPE, JEFFREY  
**Address:** 224 CHESTNUT RIDGE STREET  
**City-St-Zip:** WINTER SPRINGS, FL 32708

**Title:** D  
**Name:** RYMER, ROGER  
**Address:** 5231 SHORELINE CIRCLE  
**City-St-Zip:** SANFORD, FL 32771

**Title:** D  
**Name:** TAYLOR, MATTHEW S  
**Address:** 4792 DIKE ROAD  
**City-St-Zip:** OVIEDO, FL 32765

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: SHERI S. BELL

MRS.

05/01/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date