

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N09000003377

FILED
Apr 30, 2011
Secretary of State

Entity Name: CHILDREN'S RAINBOW MOUNTAIN RETREAT, CORP.

Current Principal Place of Business:

501 EDGEWOOD DR
MELBOURNE, FL 32901 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 33372
INDIALANTIC, FL 32903 US

New Mailing Address:

FEI Number: 26-4605622

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GREEN, PAUL A
501 EDGEWOOD DR
MELBOURNE, FL, FL 32901 US

Name and Address of New Registered Agent:

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: PRES
Name: BYRD, WILLIAM K JR
Address: 1850 ATLANTIC ST #112
City-St-Zip: MELBOURNE BEACH, FL 32951 US

Title: SEC
Name: WILSON, VICKY
Address: 501 EDGEWOOD DR
City-St-Zip: MELBOURNE,, FL 32901

Title: M.D,
Name: GREEN, PAUL A
Address: 501 EDGEWOOD DR
City-St-Zip: MELBOURNE, FL 32901

Title: BM
Name: LANGFORD, MICHAEL
Address: 501 EDGEWOOD DR
City-St-Zip: MELBOURNE, FL 32901 US

Title: BM
Name: MIRFIELD, STEPHEN
Address: 501 EDGEWOOD DR
City-St-Zip: MELBOURNE, FL 32901 US

Title: NOT
Name: NOT, NOT
Address: NOT
City-St-Zip: NOT, FL 32903

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: PAUL A. GREEN

MD

04/30/2011

Electronic Signature of Signing Officer or Director

Date