

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Mar 14, 2008 8:00 am**  
**Secretary of State**

03-14-2008 90037 043 \*\*\*\*61.25

**DOCUMENT # N10918**

1. Entity Name  
**CHILD, INC.**



Principal Place of Business  
**1245 ROGERS ST  
CLEARWATER, FL 33756 US**

Mailing Address  
**1245 ROGERS ST  
CLEARWATER, FL 33756 US**

**40045682**



2. Principal Place of Business - No P.O. Box #  
**800 N Belcher Rd**

3. Mailing Address  
**Same**

Suite, Apt., etc.  
**101**

Suite, Apt. #, etc.

01182008 Chg-NP CR2E037 (12/06)

City & State  
**Clearwater, FL**

City & State

4. FEI Number  
**59-2606601**

Applied For  
Not Applicable

Zip  
**33765**

Country  
**USA**

Zip

Country

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**RIMER, LOUISE  
1245 ROGERS ST  
CLEARWATER, FL 33756**

7. Name and Address of New Registered Agent

Name  
**Tully, Thomas**

Street Address (P.O. Box Number is Not Acceptable)  
**800 N Belcher Rd, Suite 101**

City  
**Clearwater**

FL

Zip Code  
**33765**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

*[Signature]*

Signature typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

**1/18/08**

DATE

**Filing Fee is \$61.25  
Due by May 1, 2008**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00 May Be  
Added to Fees**

**Make check payable to  
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
**D  
RIMER, LOUISE MRS  
1245 ROGERS ST  
CLEARWATER, FL 33756** ☒ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
**M  
GRUNSTRA, JAMES MR  
2227 BUENA VISTA DR  
CLEARWATER, FL 33764** ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
**S  
RIMER, MARSHA MRS  
2381 WIND GAP PL  
CLEARWATER, FL 33765** ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
**M  
MOTT, MICHAEL REV  
11045 PARK BLVD N  
ST PETERSBURG, FL 33772** ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
**D  
Tully, Thomas MR  
800 N Belcher Rd, Suite 101  
Clearwater, FL 33765** ☐ Change ☒ Addit

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.