

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N10918

FILED
Jan 06, 2009
Secretary of State

Entity Name: CHILD, INC.

Current Principal Place of Business:

800 N BELCHER RD
101
CLEARWATER, FL 33765 US

Current Mailing Address:

1245 ROGERS ST
CLEARWATER, FL 33756 US

New Principal Place of Business:

New Mailing Address:

800 N BELCHER RD
101
CLEARWATER, FL 33765 US

FEI Number: 59-2606601

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TULLY, THOMAS
800 N BELCHER RD, SUITE 101
CLEARWATER, FL 33765 US

Name and Address of New Registered Agent:

RIMER, MARSHA
800 N BELCHER RD
101
CLEARWATER, FL 33765 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: MARSHA RIMER

01/06/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: TULLY, THOMAS MR
Address: 800 N BELCHER RD, SUITE 101
City-St-Zip: CLEARWATER, FL 33765 US

Title: M () Delete
Name: GRUNSTRA, JAMES MR
Address: 2227 BUENA VISTA DR
City-St-Zip: CLEARWATER, FL 33764

Title: S () Delete
Name: RIMER, MARSHA MRS
Address: 2381 WIND GAP PL
City-St-Zip: CLEARWATER, FL 33765

Title: M (X) Delete
Name: MOTT, MICHAEL REV
Address: 11045 PARK BLVD N
City-St-Zip: ST PETERSBURG, FL 33772

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: RIMER, MARSHA MRS
Address: 2381 WIND GAP CIRCLE
City-St-Zip: CLEARWATER, FL 33765 US

Title: M (X) Change () Addition
Name: PHILIPS, CHUCK MR
Address: 105 PARK STREET
City-St-Zip: SAFETY HARBOR, FL 34695

Title: S (X) Change () Addition
Name: WAULK, CARY P MRS
Address: 800 OSCEOLA ROAD
City-St-Zip: BELLEAIR, FL 33756

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: MARSHA RIMER

D

01/06/2009

Electronic Signature of Signing Officer or Director

Date