

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N11000011110

FILED
Apr 30, 2012
Secretary of State

Entity Name: LODESTAR CHILDREN HOME ASSOCIATION, INC.

Current Principal Place of Business:

1424 TIGER LAKE DRIVE
GULF BREEZE, FL 32566

New Principal Place of Business:

Current Mailing Address:

1424 TIGER LAKE DRIVE
GULF BREEZE, FL 32566

New Mailing Address:

FEI Number: **FEI Number Applied For ()** **FEI Number Not Applicable (X)** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

LIBERIS, CHARLES S
212 WEST INTENDENCIA STREET
PENSACOLA, FL 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: TP
Name: SEGGELE, RITA
Address: 13 FOREST HILLS
City-St-Zip: LINCOLN, IL 62656

Title: TV
Name: RUTAN, CYNTHIA B
Address: 63 LOCKSLEY LANE
City-St-Zip: SPRINGFIELD, IL 62703

Title: TS
Name: MALONEY, DAVID J
Address: 8187 POMPANO STREET
City-St-Zip: NAVARRE, FL 32566

Title: TT
Name: MALONEY, EVA
Address: 8187 POMPANO STREET
City-St-Zip: NAVARRE, FL 32566

Title: T
Name: SNYDER, PAT
Address: 123 ROCHELLE AVE
City-St-Zip: LINCOLN, IL 62656

Title: T
Name: BLACK, RUTH
Address: 105 HAMMITT DRIVE
City-St-Zip: NORMAL, IL 617613520

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: RITA SEGGELE

TP

04/30/2012

Electronic Signature of Signing Officer or Director

Date