2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 20, 2004
Secretary of State

DOCUMENT# N13604

Entity Name: SHARING CONCERN FOR SEMINOLE COUNTY SHELTER CHILDREN, INC.

Current Principal Place of Business:

1400 WINDSOR AVE
LONGWOOD, FL 32750

New Principal Place of Business:

Current Mailing Address:

1400 WINDSOR AVE
LONGWOOD, FL 32750

New Mailing Address:

FEI Number: 59-2676268 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

LEFFLER, KENNETH M
1400 WINDSOR AVENUE
LONGWOOD, FL 32750 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: PD ( ) Delete
Name: LEFFLER, KENNETH M
Address: 3111 HILL ST.
City-St-Zip: NEW SMYRNA BEACH, FL 321693555

Title: DV ( ) Delete
Name: GRINDLE, ARTHUR E
Address: 241 LIVE OAK LANE
City-St-Zip: ALTAMONTE SPRINGS, FL

Title: SD ( ) Delete
Name: GAMBLE, JAMES C
Address: 907 SPRING VALLEY RD
City-St-Zip: ALTAMONTE SPRINGS, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VD (X) Change ( ) Addition
Name: JONES, MICHAEL D
Address: 560 DUNMAR CIRCLE
City-St-Zip: WINTER SPRINGS, FL 32708

Title: SD (X) Change ( ) Addition
Name: CUMMINGS, ERIN E
Address: 3912 DUNAIRE DRIVE
City-St-Zip: VALRICO, FL 33594

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: KENNETH M LEFFLER PRES 04/20/2004

Electronic Signature of Signing Officer or Director Date