

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N13604

FILED
Jan 05, 2005
Secretary of State

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

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

01/05/2005

Electronic Signature of Signing Officer or Director

_____ Date