

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N16888

FILED  
Feb 25, 2006  
Secretary of State

Entity Name: CHILD SPONSORSHIP PROGRAM, INC.

## Current Principal Place of Business:

1511 GLASTON BERRY RD  
MAITLAND, FL 32751 US

## New Principal Place of Business:

## Current Mailing Address:

1511 GLASTON BERRY RD  
MAITLAND, FL 32751 US

## New Mailing Address:

P. O. BOX 300108  
FERN PARK, FL 32730 US

FEI Number: 59-2714867

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SCOTT, CHARLES F  
1511 GLASTON BERRY RD  
MAITLAND, FL 32751 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: D ( ) Delete  
Name: ALTIZER, RAYMOND  
Address: 2352 SIERRA LANE  
City-St-Zip: MAITLAND, FL 32751

Title: D ( ) Delete  
Name: PICARD, JEAN-CLAUDE,  
Address: 7237 PLEASANT DR.  
City-St-Zip: ORLANDO, FL

Title: D ( ) Delete  
Name: SCOTT, MARY  
Address: 1511 GLASTONBERRY RD  
City-St-Zip: MAITLAND, FL

Title: D ( ) Delete  
Name: SCOTT, CHARLES F  
Address: 1511 GLASTONBERRY RD.  
City-St-Zip: MAITLAND, FL 32751

Title: D ( ) Delete  
Name: ARNOLD, JEFF  
Address: 341 N. ORLANDO AVE  
City-St-Zip: MAITLAND, FL 32751

Title: D ( ) Delete  
Name: NEWHAM, BOB  
Address: 2 CARRIAGE HILLS  
City-St-Zip: CASSELBERRY, FL

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition  
Name: ALTIZER, RAYMOND  
Address: 1760 CHOCTAW TRAIL  
City-St-Zip: MAITLAND, FL 32751

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

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

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

Title: D (X) Change ( ) Addition  
Name: COLLINS, MARY KAY  
Address: 341 N. ORLANDO AVE  
City-St-Zip: MAITLAND, FL 32751

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 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: CHARLES F. SCOTT

D

02/25/2006

Electronic Signature of Signing Officer or Director

Date