2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 04, 2008
Secretary of State

DOCUMENT# N17145

Entity Name: VOICES FOR CHILDREN OF THE SUWANNEE VALLEY CORPORATION

Current Principal Place of Business:

213 HOWARD ST. E.
LIVE OAK, FL 32064

New Principal Place of Business:

Current Mailing Address:

213 HOWARD ST. E.
LIVE OAK, FL 32064

New Mailing Address:

FEI Number: 59-2864415 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

KINSEY, DEBRA E
213 HOWARD STREET EAST
LIVE OAK, FL 32064 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: VD ( ) Delete
Name: CANNON, GAYLE
Address: 541 SE ROLLING HILLS DR
City-St-Zip: LAKE CITY, FL 32025

Title: PD ( ) Delete
Name: CERYAK, BARBARA
Address: 5127 62ND ST.
City-St-Zip: LIVE OAK, FL 32060

Title: ST ( ) Delete
Name: WALKER, LARYSSA
Address: POST OFFICE BOX 3301
City-St-Zip: LAKE CITY, FL 32056

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VD (X) Change ( ) Addition
Name: CHESHIRE, LISA
Address: 9034 141ST LANE
City-St-Zip: LIVE OAK, FL 32060

Title: PD (X) Change ( ) Addition
Name: CALVITT, DICK
Address: P O BOX 502
City-St-Zip: LIVE OAK, FL 32064

Title: S (X) Change ( ) Addition
Name: CRANKSHAW, ROB
Address: 11057 CR 136
City-St-Zip: DOWLING PARK, FL 32064

Title: T ( ) Change (X) Addition
Name: SMITH, KYNA
Address: 8892 135TH RD.
City-St-Zip: LIVE OAK, FL 32060

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: LARYSSA WALKER DIR 03/04/2008

Electronic Signature of Signing Officer or Director — Date