2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N22432

FILED Jan 17, 2009 Secretary of State

Entity Name: SPEAK UP FOR CHILDREN IN THE TENTH JUDICIAL CIRCUIT, INC.

Current Principal Place of Business:			New Princip	New Principal Place of Business:	
141 5TH S	RY M. WILSON TREET N.W., HAVEN, FL 33	SUITE 300			
Current Mailing Address:			New Mailing	New Mailing Address:	
141 5TH S	RY M. WILSON TREET N.W., HAVEN, FL 33	SUITE 300			
FEI Number:	65-0014075	FEI Number Applied For ()	FEI Number Not Applica	able () Certificate of Status Desired ()	
Name and	Address of C	Current Registered Agent:	Name and A	Address of New Registered Agent:	
141 5TH S SUITE 300 WINTER H The above	HAVEN, FL 33 named entity:		urpose of changing its	registered office or registered agent, or both,	
in the State	e of Florida.				
SIGNATU		io Signatura of Dogistarad Ago	n+	Data	
0551055		nic Signature of Registered Age		Date	
OFFICER	S AND DIREC	TORS:	ADDITIONS	CHANGES TO OFFICERS AND DIRECTORS	
Title: Name: Address: City-St-Zip:	D () STRANG, SHEI 1050 W LAKE (WINTER HAVE	OTIS DR	Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address:	DS () STEPHENS, BE 318 E. BELVED LAKALND, FL	DERE STREE	Title: Name: Address: City-St-Zip:	() Change () Addition	
City-St-Zip:					
City-St-Zip: Title: Name: Address: City-St-Zip:	DP () WILSON, KERI 141 5TH ST N \ WINTER HAVE	W STE 300	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip: Title: Name: Address:	WILSON, KERI 141 5TH ST N I WINTER HAVE	RY M., N STE 300 N, FL) Delete BI THE WOODS	Name: Address: City-St-Zip: Title: Name: Address:	() Change () Addition D (X) Change () Addition BERKE, JOHN 2416 FAIRMONT AVENUE LAKELAND, FL 33803	
Fitle: Name: Address: City-St-Zip: Fitle: Name: Address:	WILSON, KERI 141 5TH ST N N WINTER HAVE D () MANCINI, DEB 5019 LAKE IN LAKELAND, FL	RY M., W STE 300 N, FL) Delete BI THE WOODS 33813) Delete ZEL NLMA	Name: Address: City-St-Zip: Title: Name: Address:	D (X) Change()Addition BERKE, JOHN 2416 FAIRMONT AVENUE	

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: KERRY M. WILSON P 01/17/2009