2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N29359

FILED Mar 23, 2009 Secretary of State

Entity Name: CHILD GUIDANCE FOUNDATION, INC.

Current Principal Place of Business: New Principal Place of Business:

5776 ST. AUGUSTINE ROAD JACKSONVILLE, FL 32207

Current Mailing Address: New Mailing Address:

5776 ST. AUGUSTINE ROAD JACKSONVILLE, FL 32207

FEI Number: 59-2930799 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

VALENTINE, VERONICA W 5776 ST AUGUSTINE RD JACKSONVILLE, FL 32207

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:

Date

Electronic Signature of Registered Agent

US

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete (X) Change () Addition BILELLO, LORI TAPPOUNI, MARY Name: Name: 644 CESERY BOULEVARD, SUITE 210 Address: 4218 HIGHWAY AVENUE Address:

City-St-Zip: JACKSONVILLE, FL 32211 City-St-Zip: JACKSONVILLE, FL 32254

Title: Title: (X) Change () Addition () Delete Name: TURK, WILLIAM R DR. Name: LAZENBY, MAURICE

Address: 807 CHILDREN'S WAY Address: 2618 LIGHTHOUSE BEND DRIVE City-St-Zip: JACKSONVILLE, FL 32207 City-St-Zip: PONTE VEDRA, FL 32082

Title: () Delete Title: (X) Change () Addition ANNE, MCINTOSH Name: CAPALDO, LYNN Name:

4063 RIBAULT RIVER LANE 4800 DEERWOOD CAMPUS PKWAY, Address: Address:

City-St-Zip: JACKSONVILLE, FL 32208 City-St-Zip: JACKSONVILLE, FL 32246

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: VERONICA W. VALENTINE MS. 03/23/2009