2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N32477

FILED Jan 27, 2006 Secretary of State

Entity Name: CHILDREN'S FORUM, INC.

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

2807 REMINGTON GREEN CIRCLE TALLAHASSEE, FL 32308

Current Mailing Address: New Mailing Address:

2807 REMINGTON GREEN CIRCLE TALLAHASSEE, FL 32308

FEI Number: 65-0165007 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

KALIFEH, PHYLLIS 2807 REMINGTON GREEN CIRCLE TALLAHASSEE, FL 32308

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

Name:

Electronic Signature of Registered Agent

FIELDS, MICHAEL

(X) Change () Addition

() Change () Addition

OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete FIELDS, MICHAEL Name: 315 SOUTH CALHOUN STREET Address:

Address: 315 SOUTH CALHOUN STREET City-St-Zip: TALLAHASSEE, FL 32301 City-St-Zip: TALLAHASSEE, FL 32301

Title: DVC (X) Delete Title: CARD, CHRISTOPHER Name: Name:

Address: 25 NORTH SCHOOL AVE. Address: City-St-Zip: SARASOTA, FL 34237 City-St-Zip:

Title: DVC () Delete Title: () Change () Addition

LEVY, ANN Name: Name: 2807 REMINGTON GREEN CIRCLE Address: Address: City-St-Zip: TALLAHASSEE, FL 32308 City-St-Zip:

(X) Change () Addition Title: DΡ () Delete Title: DP KALIFEH, PHYLLIS Name: KALIFEH, PHYLLIS Name: 2807 REMINGTON GREEN CIRCLE 2807 REMINGTON GREEN CIRCLE Address: Address:

City-St-Zip: TALLAHASSEE, FL 32303 City-St-Zip: TALLAHASSEE, FL 32308

Title: DS () Delete Title: () Change () Addition

STOLLER, LINDA Name: Name: 8900 ARMENIA AVE, SUITE 210 Address: Address: City-St-Zip: TAMPA, FL 33604 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: PHYLLIS KALIFEH DP 01/27/2006