

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N35555

FILED  
Feb 11, 2010  
Secretary of State

**Entity Name:** FAMILY TIES CHILD CENTER, INC.

**Current Principal Place of Business:**

3230 SE 58TH AVE  
OCALA, FL 34480 US

**New Principal Place of Business:**

3230 S.E. 58TH AVE  
OCALA, FL 34480 US

**Current Mailing Address:**

3230 SE 58TH AVE  
OCALA, FL 34480 US

**New Mailing Address:**

3230 S.E. 58TH AVE  
OCALA, FL 34480 US

**FEI Number:** 59-2982582

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

HAGENHOFF, KARON  
3230 SE 58TH AVE  
OCALA, FL 34480 US

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

HAGENHOFF, KARON  
3230 S.E. 58TH AVE  
OCALA, FL 34480 US

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:

02/11/2010

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PS  
Name: HAGENHOFF, KARON F  
Address: 4863 S.E. 40TH TERRACE  
City-St-Zip: OCALA, FL 34480

Title: VT  
Name: HAGENHOFF, KENNETH J  
Address: 4863 S.E. 40TH TERRACE  
City-St-Zip: OCALA, FL 34480

Title: D  
Name: IZZO, CAROL  
Address: 4864 S.E. 41ST COURT  
City-St-Zip: OCALA, FL 34480

Title: D  
Name: CARVALHO, JOSEPH  
Address: 205 S.E. SANCHEZ AVE.  
City-St-Zip: OCALA, FL 34471

Title: D  
Name: LONG, GRACE  
Address: 9301 S.E. 35TH AVE  
City-St-Zip: OCALA, FL 34480

I hereby 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 all other like empowered.

SIGNATURE: KENNETH J.HAGENHOFF

V/T

02/11/2010

Electronic Signature of Signing Officer or Director

Date