

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N35905

FILED
May 20, 2011
Secretary of State

Entity Name: SAVE OUR CHILDREN, INC.

Current Principal Place of Business:

1611 AVE D
FT PIERCE, FL 34950 US

New Principal Place of Business:

Current Mailing Address:

POST OFFICE BOX 311
FT PIERCE, FL 34954 US

New Mailing Address:

FEI Number: 65-0366437

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MILLS, KENNETH G REV.
1330 SW BRIARWOOD DR
PORT SAINT LUCIE, FL 34986 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: ST
Name: MCBRIDE, PATRICIA
Address: 603 SOUTH 22ND STREET
City-St-Zip: FORT PIERCE, FL 34950

Title: PD
Name: ESCH, GARY
Address: 3215 S 7TH ST
City-St-Zip: FT. PIERCE, FL 34947

Title: D
Name: FINLETTER, VIVIENNE
Address: 4156 OKEECHOBEE ROAD
City-St-Zip: FORT PIERCE, FL 34947 US

Title: VP
Name: JOHNSON, DEVOSHAY
Address: 794 BENT CREEK DRIVE
City-St-Zip: FORT PIERCE, FL 34947 US

Title: D
Name: DEAN, ANDREA
Address: 4901 EL NUEVA AVE.
City-St-Zip: FORT PIERCE, FL 34946 US

Title: D
Name: MAYNARD, SHANIEK
Address: 111 SUMMERVILLE LANE
City-St-Zip: PORT ST. LUCIE, FL 34986 US

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: REV. KENNETH MILLS SR.

DIR

05/20/2011

Electronic Signature of Signing Officer or Director

Date