

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N41195

FILED
Feb 08, 2012
Secretary of State

Entity Name: SEMINOLE COUNTY FRIENDS OF ABUSED CHILDREN, INC.

Current Principal Place of Business:

930 BRITT COURT
#126
ALTAMONTE SPRINGS, FL 32701 US

New Principal Place of Business:

910 WATERWAY PLACE
LONGWOOD, FL 32750 US

Current Mailing Address:

P.O. BOX 950881
P.O. BOX 950881
LAKE MARY, FL 327950881 US

New Mailing Address:

P.O. BOX 161351
P.O. BOX 161351
ALTAMONTE SPRINGS, FL 32716-135 US

FEI Number: 59-3044327

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

SHORTHOUSE, FAITH J PRES
524-101 VIA VERONA LANE
ALTAMONTE SPRINGS, FL 32714 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: PD
Name: SHORTHOUSE, FAITH PRES
Address: 524-101 VIA VERONA LANE
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

Title: VPD
Name: STIMAC, YVONNE VICEPRE
Address: 232 OAK HURST STREET
City-St-Zip: ALTAMONTE SPRINGS, FL 32701

Title: DS
Name: BRANDELL, KAREN J SECRETA
Address: 833 MILLRACE POINT
City-St-Zip: LONGWOOD, FL 32750

Title: DT
Name: WILLOUGHBY, BRIDGET TREASUR
Address: 852 PARK LAKE COURT
City-St-Zip: ORLANDO, FL 32803 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: FAITH J. SHORTHOUSE

PRES

02/08/2012

Electronic Signature of Signing Officer or Director

Date