


# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Jan 23, 2006 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # N43460</b>	
1. Entity Name <b>VOICE FOR FLORIDA KEYS CHILDREN, INCORPORATED</b>	

Principal Place of Business <b>97652 OVERSEAS HWY APT T12 KEY LARGO, FL 33037 US</b>	Mailing Address <b>97652 OVERSEAS HWY APT T12 KEY LARGO, FL 33037 US</b>
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01132006 No Chg-NP CR2E037 (11/05)

4. FEI Number <b>65-0305892</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	

6. Name and Address of Current Registered Agent  <b>CHILDREE, CHRISTINE 97652 OVERSEAS HWY APT T12 KEY LARGO, FL 33037</b>
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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ <small>Signature, typed or printed name of registered agent and file if applicable.</small>	(NOTE: Registered Agent signature required when reinstating)	DATE _____
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<b>Filing Fee is \$61.25 Due by May 1, 2006</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD CHILDREE, CHRISTINE 97652 OVERSEAS HWY, APT T12 KEY LARGO, FL 33037
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PSD LANG, CLAIRE BOX 1176 ISLAMORADA, FL 33036
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VO MORET, SUE PO BOX 1757 ISLAMORADA, FL 33036
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD SAYLOR, ANDY 79901 OVERSEAS HWY ISLAMORADA, FL 33036
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

<b>SIGNATURE:</b> <u>Christine Childree</u> <b>CHRISTINE CHILDREE</b> <u>1-19-06</u> <u>305-853-9315</u>
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>