2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N45244

FILED Apr 11, 2006 Secretary of State

Entity Name: FRIENDS OF OSCEOLA CHILDREN, INC.

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

2901 WILLOW OAK CT TWO COURTHOUSE SQUARE KISSIMMEE, FL 34744 9

SUITE 344 - GAL OFFICE KISSIMMEE, FL 34741

Current Mailing Address: New Mailing Address:

P.O. BOX 452377 KISSIMMEE, FL 34745

FEI Number: 59-3093016 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:

WANDEL, KATHY 1410 RIVIÉRA DR

KISSIMMEE, FL 34744 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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change () Addition () Delete MILLER, KAREN BUTLER MILLER, KAREN BUTLER Name: Name: 2901 WILLOW OAK CT Address: 2901 WILLOW OAK CT Address:

City-St-Zip: KISSIMMEE, FL 34744 City-St-Zip: KISSIMMEE, FL 34744

Title: SD () Delete Title: S/D (X) Change () Addition DALTON, JACKIE Name: DALTON, JACKIE Name:

Address: 732 LOUSIANA AVE Address: 732 LOUSIANA AVE City-St-Zip: SAINT CLOUD, FL 34769 City-St-Zip: SAINT CLOUD, FL 34769

Title: () Delete Title: P/D (X) Change () Addition WANDEL, KATHY WANDEL, KATHY Name: Name:

1410 RIVIERA DR Address: Address: 1410 RIVIERA DR City-St-Zip: KISSIMMEE, FL 34744 City-St-Zip: KISSIMMEE, FL 34744

Title: VΡ () Delete Title: V/D (X) Change () Addition

Name: CRUTCHFIELD, SUSAN Name: CRUTCHFIELD, SUSAN 3163 ORANGE BLOSSOM TRAIL 4345 REAVES RD Address: Address: City-St-Zip: KISSIMMEE, FL 34744 City-St-Zip: KISSIMMEE, FL 34746

Title: () Delete Title: () Change (X) Addition

PALMER, JANICE Name: Name: 704 HONEYSUCKLE AVE Address: Address: City-St-Zip: City-St-Zip: CELEBRATION, FL 34747

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: KATHY WANDEL Ρ 04/11/2006