2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 25, 2006
Secretary of State

DOCUMENT# N47151

Entity Name: GUATEMALA CHILDREN'S MISSION, INC.

Current Principal Place of Business:

8687 KELSO DRIVE
PALM BEACH GARDENS, FL 334186025 US

New Principal Place of Business:

Current Mailing Address:

8687 KELSO DRIVE
PALM BEACH GARDENS, FL 334186025 US

New Mailing Address:

FEI Number: 65-0312952 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MALONEY, THOMAS E.
4501 TAMIAMI TRAIL NORTH
SUITE 300
NAPLES, FL 33940 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:	VP	( ) Delete
Name:	SHEEHY, TIM	
Address:	5749 OAKLEIGH LN	
City-St-Zip:	GERMANTOWN, TN 38138	
Title:	D	( ) Delete
Name:	SALISBURY, JOHN	
Address:	1601 BENT ROAD	
City-St-Zip:	WAKE FOREST, NC 27587	
Title:	S	( ) Delete
Name:	WEDA, CAROLYN S	
Address:	2130 RADNOR CT.	
City-St-Zip:	NORTH PALM BEACH, FL 33408	
Title:	T	( ) Delete
Name:	MICHAEL J. LAUGHLIN,	
Address:	8687 KELSO DRIVE	
City-St-Zip:	PALM BEACH GARDENS, FL 33418	
Title:	D	( ) Delete
Name:	ADRIAN ZVARYCH,	
Address:	377 MAGNOLIA PL	
City-St-Zip:	DEBARY, FL 32713	
Title:	D	( ) Delete
Name:	WEDA, KENNETH A	
Address:	2130 RADNOR CT.	
City-St-Zip:	NORTH PALM BEACH, FL 33408	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:	P	(X) Change ( ) Addition
Name:	CHRIS GAULT,	
Address:	2135 SETON PLACE	
City-St-Zip:	GERMANTOWN, TN 38139	

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: MICHAEL J LAUGHLIN T 04/25/2006
Electronic Signature of Signing Officer or Director — Date