

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N92000000752

FILED
Apr 17, 2008
Secretary of State

Entity Name: CONNOR MORAN CHILDREN'S CANCER FOUNDATION, INC.

Current Principal Place of Business:

825 US HWY ONE
SUITE 200
JUPITER, FL 33477 US

New Principal Place of Business:

Current Mailing Address:

825 US HWY ONE
SUITE 200
JUPITER, FL 33477 US

New Mailing Address:

FEI Number: 65-0374021

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GARRIS, CHARLES E
817 BEACHLAND BLVD
VERO BEACH, FL 32963 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: FONG, HENRY
Address: 500 AUSTRALIAN AVE S #625
City-St-Zip: WEST PALM BEACH, FL 33401

Title: ED () Delete
Name: MORAN, TERI
Address: 19224 COUNTRY CLUB DRIVE
City-St-Zip: TEQUESTA, FL 33469

Title: D () Delete
Name: CHARNEV, BERNIE
Address: 11107 OAKDALE RD
City-St-Zip: BOYNTON BEACH, FL 33437

Title: P () Delete
Name: SCHULZ, GRETA
Address: 5713 CORP. WAY SUITE 102
City-St-Zip: WEST PALM BEACH, FL 33407

Title: T () Delete
Name: FRANKEN, DAVID
Address: 3801 PGA BLVD 10TH FLOOR
City-St-Zip: PALM BEACH GARDENS, FL 33410

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: CHARNEY, BERNIE
Address: 11107 OAKDALE RD
City-St-Zip: BOYNTON BEACH, FL 33437

Title: T (X) Change () Addition
Name: BARON, STANLEY
Address: 11832 FOUNTAINSIDE CIRCLE
City-St-Zip: BOYNTON BEACH, FL 33437

Title: P (X) Change () Addition
Name: FRANKEN, DAVID
Address: 3801 PGA BLVD 10TH FLOOR
City-St-Zip: PALM BEACH GARDENS, FL 33410

I hereby certify that the information supplied with this filing does not qualify 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: TERI MORAN

ED

04/17/2008

Electronic Signature of Signing Officer or Director

Date