

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000001547

FILED
Apr 08, 2009
Secretary of State

Entity Name: NEEDY SCHOOL CHILDREN'S FUND, INC.

Current Principal Place of Business:

318 N CLARK ST
PERRY, FL 32347 US

New Principal Place of Business:

Current Mailing Address:

318 N CLARK ST
PERRY, FL 32347 US

New Mailing Address:

FEI Number: 59-3216773 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

PARKER, GREGORY S
315 WEST GREEN STREET
PERRY, FL 32347 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: SD () Delete
Name: WHITFIELD, DIANE
Address: 318-A N CLARK ST
City-St-Zip: PERRY, FL 32347

Title: MTC () Delete
Name: BROOKS, RHONDA
Address: 318 N CLARK STREET
City-St-Zip: PERRY, FL 32347

Title: D () Delete
Name: SCHRAMM, BERINDA
Address: 800 W. ASH ST.
City-St-Zip: PERRY, FL

Title: D () Delete
Name: HERNDON, RANDY
Address: 318 N. CLARK ST.
City-St-Zip: PERRY, FL 32347

Title: D () Delete
Name: STEPHENS, BETSY
Address: 318 N. CLARK ST.
City-St-Zip: PERRY, FL 32347

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: SD (X) Change () Addition
Name: WHITFIELD, DIANE
Address: 318 N CLARK ST
City-St-Zip: PERRY, FL 32347

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:

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: RHONDA W. BROOKS

MTC

04/08/2009

Electronic Signature of Signing Officer or Director

Date