2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N93000005806

FILED May 05, 2003 Secretary of State

Entity Name: THE CHILDREN'S PLACE AT HOME SAFE FOUNDATION, INC.

Current Principal Place of Business:		New Principal Place	New Principal Place of Business:	
	CE DE LEON AVENUE LM BEACH, FL 33407 US			
Current Mailing Address:		New Mailing Address	New Mailing Address:	
	CE DE LEON BLVD. LM BEACH, FL 33407 US			
FEI Number:	: 65-0462950 FEI Number Applied For()	FEI Number Not Applicable()	Certificate of Status Desired (X)	
Name and	Address of Current Registered Agent:	Name and Address o	f New Registered Agent:	
2309 PON	SKY, HOWARD S CE DE LEON AVE LM BEACH, FL 33407 US			
	named entity submits this statement for the purpe of Florida.	pose of changing its registered	d office or registered agent, or both,	
SIGNATU			Dete	
OFFICERS	Electronic Signature of Registered Agent S AND DIRECTORS:	ADDITIONS/CHANGE	Date ES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	D () Delete RAMPELL, RICHARD 122 N. COUNTY RD. PALM BEACH, FL 33480	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D () Delete MALFITANO, JAYNE 2323 ARECA PALM ROAD BOCA RATON, FL 33432	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D () Delete ROONEY, PATRICK 1111 N CONGRESS AVE WEST PALM BEACH, FL 33409	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D () Delete PICOW, ROBERT 7534 ISLA VERDE WAY DELRAY BEACH, FL 33446	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D () Delete DON, STEPHANIE 17837 FIELDBROOK CIRCLE W BOCA RATON, FL 33496	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	P () Delete BERNSTEIN, STEVE 5900 BROKEN SOUND PKWY NW BOCA RATON, FL 33487	Title: Name: Address: City-St-Zip:	() Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: STEVE BERNSTEIN P 05/05/2003