

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000000492

FILED
Mar 17, 2005
Secretary of State

Entity Name: OUR SMALL CHILDREN AT RISK FOUNDATION, INC.

Current Principal Place of Business:

24534 SR 44
SUITE 3
SORRENTO, FL 32776 US

New Principal Place of Business:

Current Mailing Address:

24534 SR 44
SUITE 3
SORRENTO, FL 32776 US

New Mailing Address:

FEI Number: 59-3211081 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

BARRETT, ALICIA
23017 HWY 44 E
EUSTIS, FL 32726 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: D () Delete
Name: LAVENDER, CATHY
Address: 1201 ALFRED ST
City-St-Zip: TAVARES, FL 32778

Title: C () Delete
Name: BARRETT, ALICIA
Address: 23017 SR 44
City-St-Zip: EUSTIS, FL 32736

Title: CP () Delete
Name: BARRETT, ALICIA
Address: 23017 SR 44
City-St-Zip: EUSTIS, FL 32736

Title: DS () Delete
Name: MAYO, MICHELE
Address: 6368 COUNTY RD. 154 B
City-St-Zip: WILDWOOD, FL 34785

Title: D () Delete
Name: SINDLER, ROBERT
Address: 31415 ST ANDREWS DRIVE
City-St-Zip: SORRENTO, FL 32776

Title: D () Delete
Name: MAYO, MICHELLE
Address: 805 SOUTH MAIN STREET
City-St-Zip: WILDWOOD, FL 34785

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: HARBOR, THERESA
Address: 15549 APACHE PASS
City-St-Zip: EUSTIS, FL 32726

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: D (X) Change () Addition
Name: BARRETT, JENNIFER
Address: 21115 ORANGE CT
City-St-Zip: MOUNT DORA, FL 32757

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

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: ALICIA BARRETT

CP

03/17/2005

Electronic Signature of Signing Officer or Director

Date