


2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 26, 2006 08:00 AM
Secretary of State

DOCUMENT # N94000001995	
1. Entity Name CHILDRENS AIDS NETWORK NATIONAL, INC.	

Principal Place of Business 3015 N. OCEAN BLVD. SUITE 109 FT. LAUDERDALE, FL 33308	Mailing Address 3015 N. OCEAN BLVD. SUITE 109 FT. LAUDERDALE, FL 33308
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DO NOT WRITE IN THIS SPACE



04182006 No Chg-NP CR2E037 (11/05)

4. FEI Number 65-0484404	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent

WRIGHT, JOHN B
6301 SW 3RD ST
MARGATE, FL 33068

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IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) **DATE** _____

**Filing Fee is \$61.25
Due by May 1, 2006**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	EATON, MICHAEL C
STREET ADDRESS	3015 N. OCEAN BLVD., STE 109
CITY-ST-ZIP	FT. LAUDERDALE, FL
TITLE	T
NAME	MODRECK, GEORGIA
STREET ADDRESS	3015 N. OCEAN BLVD. #109
CITY-ST-ZIP	FT. LAUDERDALE, FL
TITLE	D
NAME	ERBELING, JOHN S.
STREET ADDRESS	3015 N. OCEAN BLVD. #109
CITY-ST-ZIP	FT. LAUDERDALE, FL
TITLE	D
NAME	WRIGHT, JOHN B.
STREET ADDRESS	3015 N OCEAN BLVD, STE 109
CITY-ST-ZIP	FT LAUDERDALE, FL
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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05/08/06-80026-011 61.25

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: John B Wright **DATE** 4-22-06 **Daytime Phone #** 954-630-0401