2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 08, 2008
Secretary of State

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Entity Name: CHILDBIRTH ENHANCEMENT FOUNDATION, INC.

Current Principal Place of Business:

1004 GEORGE AVENUE
ROCKLEDGE, FL 32955 US

New Principal Place of Business:

Current Mailing Address:

1004 GEORGE AVENUE
ROCKLEDGE, FL 32955

New Mailing Address:

FEI Number: 59-3255534 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BRADLEY, KATHY
1004 GEORGE AVENUE
ROCKLEDGE, FL 32955 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:	PD	( ) Delete
Name:	BRADLEY, KATHY	
Address:	1004 GEORGE AVENUE	
City-St-Zip:	ROCKLEDGE, FL	
Title:	STD	( ) Delete
Name:	BRADLEY, KEVIN J	
Address:	1004 GEORGE AVE.	
City-St-Zip:	ROCKLEDGE, FL 32955	
Title:	D	( ) Delete
Name:	YASMIN, LEWIS	
Address:	949 RIVIERA DR NE	
City-St-Zip:	PALM BAY, FL 32905	
Title:	D	( ) Delete
Name:	MATTOX, ROBYN	
Address:	15507 CRYSTAL CREEK CT.	
City-St-Zip:	CLERMONT, FL 34711	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:	STD	(X) Change ( ) Addition
Name:	BRADLEY, KEVIN J	
Address:	1012 GEORGE AVE.	
City-St-Zip:	ROCKLEDGE, FL 32955	
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: KATHY BRADLEY PRES 04/08/2008

Electronic Signature of Signing Officer or Director — Date