

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000003505

FILED  
Apr 14, 2011  
Secretary of State

**Entity Name:** CHILDCARE RESOURCES OF INDIAN RIVER, INC.

**Current Principal Place of Business:**

1801 24TH STREET  
VERO BEACH, FL 32960 US

**New Principal Place of Business:**

**Current Mailing Address:**

1801 24TH STREET  
VERO BEACH, FL 32960 US

**New Mailing Address:**

**FEI Number:** 65-0523165

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

KING, PAMELA C.  
1801 24TH STREET  
VERO BEACH, FL 32960 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: P  
Name: DOGGETT, STANLEY  
Address: 1801 24TH STREET  
City-St-Zip: VERO BEACH, FL 32960

Title: AT L  
Name: NEUBARTH, BARBARA  
Address: 1801 24TH STREET  
City-St-Zip: VERO BEACH, FL 32960

Title: AT L  
Name: RAINONE, TRUDIE  
Address: 1801 24TH STREET  
City-St-Zip: VERO BEACH, FL 32960

Title: TD  
Name: REISINGER, DAVID  
Address: 1801 24TH STREET  
City-St-Zip: VERO BEACH, FL 32960

Title: ED  
Name: KING, PAMELA C.  
Address: 1801 24TH STREET  
City-St-Zip: VERO BEACH, FL 32960

Title: PP  
Name: GRALL, ERIN  
Address: 1801 24TH STREET  
City-St-Zip: VERO BEACH, FL 32960

I hereby 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 all other like empowered.

SIGNATURE: PAM KING

ED

04/14/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date