2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N9600000238

FILED Jan 06, 2009 Secretary of State

Entity Name: CENTER FOR ADOPTION REFORM AND EDUCATION INC.

Current Principal Place of Business:		New Principal Place	New Principal Place of Business:	
	RCO PLACE NVILLE, FL 322	207		
urrent N	lailing Addre	ss:	New Mailing Addres	ss:
	RCO PLACE NVILLE, FL 32:	207		
El Number	: 59-3361521	FEI Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()
Name and Address of Current Registered Agent:		Name and Address of New Registered Agent:		
\cap 2 \cup 4 \cap				
122 MAR	N, MOLLY RCO PLACE IVILLE, FL 32:	207 US		
122 MAR ACKSON he above	RÓO PLACE IVILLE, FL 32:		purpose of changing its registere	ed office or registered agent, or both
122 MAR ACKSON he above	RCO PLACE IVILLE, FL 32: Inamed entity In of Florida. RE:	submits this statement for the		
122 MAR ACKSON he above the State	RCO PLACE IVILLE, FL 32: e named entity e of Florida. RE: Electro	submits this statement for the	ent	Date
122 MAR ACKSON he above the State	RCO PLACE IVILLE, FL 32: Inamed entity In of Florida. RE:	submits this statement for the	ent	
122 MAR ACKSON he above the State	RÓO PLACE IVILLE, FL 32: e named entity e of Florida. RE: Electrol S AND DIREC	submits this statement for the nic Signature of Registered Agertors: Delete DLLY	ent	Date
122 MAR ACKSON he above the State IGNATUI PFFICER: tte: ame: ddress:	e named entity e of Florida. RE: Electroi S AND DIREC D (JOHNSON, MC 1122 MARCO JACKSONVILL	submits this statement for the nic Signature of Registered Agertors: Delete DLLY PL E, FL Delete DENCE DR	ent ADDITIONS/CHANG Title: Name: Address:	Date ES TO OFFICERS AND DIRECTO

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: MOLLY JOHNSON D 01/06/2009