

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N96000004681

1. Entity Name

CHILDREN'S COALITION FOR CHANGE, INC.

FILED

Apr 29, 2002 8:00 am
Secretary of State

04-29-2002 90176 026 ****70.00

Principal Place of Business

888 BLVD OF THE ARTS #1203
SARASOTA FL 34236
US

Mailing Address

888 BLVD OF THE ARTS #1203
SARASOTA FL 34236
US

2. Principal Place of Business

303 Londonderry DR.
Sarasota, FL

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

Zip

Country

4. FEI Number

65-0817516

☒ Applied For
☐ Not Applicable

5. Certificate of Status Desired

☒ \$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

MUORIE, IDA R
888 BLVD OF THE ARTS, #1203
SARASOTA FL 34236

7. Name and Address of New Registered Agent

Name MUORIE, IDA R
Street Address (P.O. Box Number is Not Acceptable)
303 LONDONDERRY DRIVE
SARASOTA
City FL Zip Code 34240

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.

SIGNATURE *Ida R Muorie*
Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

04/14/02
DATE

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

TITLE PD
NAME MUORIE, IDA R
STREET ADDRESS 888 BLVD OF THE ARTS #1213
CITY-ST-ZIP SARASOTA FL 34236 ☐ Delete

TITLE DV
NAME DAVIS, HELEN A DR.
STREET ADDRESS 888 BLVD OF THE ARTS #1203
CITY-ST-ZIP SARASOTA FL 34236 ☐ Delete

TITLE D
NAME WILLIAMS, ROBERT ROLAND
STREET ADDRESS 888 BLVD OF THE ARTS, #1213
CITY-ST-ZIP SARASOTA FL 34236 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD
NAME MUORIE, IDA R
STREET ADDRESS 303 LONDONDERRY DR
CITY-ST-ZIP SARASOTA, FL 34240 ☒ Change ☐ Addition

TITLE DV
NAME DAVIS, HELEN A DR
STREET ADDRESS 303 LONDONDERRY DR.
CITY-ST-ZIP SARASOTA, FL 34240 ☒ Change ☐ Addition

TITLE D
NAME BIANCA STRAUSS
STREET ADDRESS 2008 Calusa Lake Blvd
CITY-ST-ZIP Nokomis, FL 34275 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify 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 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 an other like empowered.

SIGNATURE:

Ida R Muorie
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

04/14/02 941-343-0080
Date Daytime Phone #

CR2E037 (9/01)