

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000006066

FILED  
Mar 12, 2007  
Secretary of State

**Entity Name:** THE CHILDREN'S BURN FOUNDATION OF FLORIDA, INC.

**Current Principal Place of Business:**

21457 JINGLE ROAD  
CHRISTMAS, FL 32709

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 678369  
ORLANDO, FL 32867

**New Mailing Address:**

**FEI Number:** 59-3573985

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

WUNDERLY, TAMARA T  
21457 JINGLE RD.  
CHRISTMAS, FL 32709 US

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

KIMELMAN, WENDY R  
3240 BEAZER DRIVE  
OCOOE, FL 34761 US

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: WENDY R. KIMELMAN

03/12/2007

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: DP ( ) Delete  
Name: WUNDERLY, TAMARA T  
Address: 21457 JINGLE RD.  
City-St-Zip: CHRISTMAS, FL 32709

Title: DV ( ) Delete  
Name: KARST, DEBORAH  
Address: 1375 5TH ST.  
City-St-Zip: CLERMONT, FL 34711

Title: DST ( ) Delete  
Name: KIMELMAN, WENDY  
Address: 3240 BEAZER DRIVE  
City-St-Zip: OCOEE, FL 34761

Title: D ( ) Delete  
Name: QUINTANA, OLGA  
Address: 18331 NW 36 AVENUE  
City-St-Zip: HIALEAH, FL 33015

Title: S ( ) Delete  
Name: PEYTON, DAVID  
Address: 1000 CATHY DR  
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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 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: WENDY R. KIMELMAN

TREA

03/12/2007

Electronic Signature of Signing Officer or Director

Date