2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 29, 2009
Secretary of State

DOCUMENT# N98000006066

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:

KIMELMAN, WENDY R
3240 BEAZER DRIVE
OCOEE, FL 34761 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:	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	(X) 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 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 04/29/2009

Electronic Signature of Signing Officer or Director — Date