

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000006373

FILED  
Mar 05, 2009  
Secretary of State

**Entity Name:** BARBARA'S PLAYHOUSE A HAVEN FOR LITTLE ANGELS, INC.

**Current Principal Place of Business:**

1151 W. 4TH ST  
WEST PALM BEACH, FL 33404

**New Principal Place of Business:**

**Current Mailing Address:**

1151 W. 4TH ST  
WEST PALM BEACH, FL 33404

**New Mailing Address:**

**FEI Number:** 31-1639511

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MCMILLAN-TOOMBS, BARBARA  
4689 SABLE PINE CIRCLE, 952 A2  
WEST PALM BEACH, FL 334173135 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 ( ) Delete  
Name: MCMILLAN-TOOMBS, BARBARA  
Address: 1151 W. 4TH STREET  
City-St-Zip: RIVIERA BEACH, FL 33404

Title: VD ( ) Delete  
Name: BROOKINGS, JAMES  
Address: 371 32ND STREET WEST  
City-St-Zip: RIVIERA BEACH, FL 33404

Title: SD ( ) Delete  
Name: WILLIAMS-JENKINS, PATCY J  
Address: 1120 SAPODILLA AVENUE  
City-St-Zip: WEST PALM BEACH, FL 33401

Title: TD ( ) Delete  
Name: COLE, NAOMI J  
Address: 912 OLIVE TREE CREEK  
City-St-Zip: GREENACRES, FL 33413

**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:

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: BARBARA MCMILLAN-TOOMBS

PRES

03/05/2009

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

\_\_\_\_\_  
Date