

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000000799

FILED
Jan 23, 2007
Secretary of State

Entity Name: THE FUND FOR THE FLORIDA CENTER FOR CHILD AND FAMILY DEVELOPMENT, INC.

Current Principal Place of Business:

4620 17TH STREET
SARASOTA, FL 34235 US

New Principal Place of Business:

Current Mailing Address:

4620 17TH STREET
SARASOTA, FL 34235 US

New Mailing Address:

FEI Number: 65-1027375 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

ERB, CALVIN W
3148A SOUTHGATE CIRCLE
SARASOTA, FL 34239 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: CH () Delete
Name: BENNETT, MICHAEL
Address: 3653 CORTEZ ROAD WEST,STE. 90
City-St-Zip: BRADENTON, FL 34210

Title: VCH () Delete
Name: VOLLMER, DEBBY
Address: 4620 17TH ST
City-St-Zip: SARASOTA, FL 34235

Title: S () Delete
Name: MILLER, JAN
Address: 8592 POTTER PARK DRIVE
City-St-Zip: SARASOTA, FL 34238

Title: TR () Delete
Name: ERB, CAL
Address: 3148A SOUTHGATE CIRCLE
City-St-Zip: SARASOTA, FL 34239

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VCH (X) Change () Addition
Name: VOLLMER, DEBBY
Address: 2050 BEN FRANKLIN DRIVE #804
City-St-Zip: SARASOTA, FL 34236

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: CAL ERB

TR

01/23/2007

Electronic Signature of Signing Officer or Director

Date