

**2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Jan 07, 2008**  
**Secretary of State**

DOCUMENT# N99000000799

**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: 2050 BEN FRANKLIN DRIVE #804  
City-St-Zip: SARASOTA, FL 34236

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

Title: TR (X) 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: MILLER, JAN  
Address: 8592 POTTER PARK DRIVE  
City-St-Zip: SARASOTA, FL 34238

Title: TR (X) Change ( ) Addition  
Name: ERB, CALVIN  
Address: 3148A SOUTHGATE CIRCLE  
City-St-Zip: SARASOTA, FL 34239

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: MICHAEL BENNETT

CH

01/07/2008

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

\_\_\_\_\_  
Date