## 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N99000001795

Entity Name: CHILDREN'S COLLEGE, INC.

FILED Apr 30, 2004 Secretary of State

Current Principal Place of Business:

635 W. 6TH ST.
RIVIERA, FL 33404

New Principal Place of Business:

635 W. 6TH ST.
RIVIERA BEACH, FL 33404

Current Mailing Address: New Mailing Address:

635 W. 6TH ST. 635 W. 6TH ST. RIVIERA, FL 33404 RIVIERA BEACH, FL 33404

FEI Number: 65-1003948 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X)

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

RAIFORD, MEDIALEAN

8628 DOVER BROOK DR.

PALM BCH GARDEN, FL 33401 US

RAIFORD, MEDIALEAN

8628 DOVER BROOK DR.

PALM BCH GARDEN, FL 33410 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: NORNAN L. RAIFORD 04/30/2004

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:D () DeleteTitle:() Change () AdditionName:RAIFORD, MEDIA LName:Address:8628 DOVER BROOK DR.Address:City-St-Zip:PALM BCH GARDENS, FL 33401City-St-Zip:

Title: D ( ) Delete Title: ( ) Change ( ) Addition Name: LITTLES, TOWANDA Name:

 Address:
 635 W. 6TH ST.
 Address:

 City-St-Zip:
 RIVIERA, FL 33404
 City-St-Zip:

Title: D ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 KENTISH, CLIVE
 Name:

 Address:
 635 W. 6TH ST.
 Address:

 City-St-Zip:
 RIVIERA, FL 33404
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: MEDIALEAN RAIFORD MRS 04/30/2004