2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 29, 2007
Secretary of State

DOCUMENT# N99000003917

Entity Name: CHILDREN OF CHAOS, INC.

Current Principal Place of Business:

2589 MADELINE AVE
WINTER PARK, FL 32789 US

New Principal Place of Business:

Current Mailing Address:

2589 MADELINE AVE
WINTER PARK, FL 32789 US

New Mailing Address:

PO BOX 10248
SOUTHPORT, NC 28461 US

FEI Number: 59-3590237 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BATTALGIA, JOHN
935 8TH ST
STE 18
MIAMI BEACH, FL 33139 US

Name and Address of New Registered Agent:

BATTALGIA, TREBOR
935 8TH ST
STE 18
MIAMI BEACH, FL 33139 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: TREBOR BATTAGLIA 01/29/2007
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: BATTAGLIA, JOHN
Address: 1117 YARROW ST
City-St-Zip: MATTHEWS, NC 28104 US

Title: D ( ) Delete
Name: BATTAGLIA, KATHLEEN M
Address: 1117 YARROW ST.
City-St-Zip: MATTHEWS, NC 28104 US

Title: D ( ) Delete
Name: ORD, SUSAN R
Address: 2767 SHERLOCK DRIVE
City-St-Zip: SAN JOSE, CA 95121 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition
Name: BATTAGLIA, JOHN
Address: 776 CREEK WAY CIRCLE
City-St-Zip: BOLIVIA, NC 28422 US

Title: D (X) Change ( ) Addition
Name: BATTAGLIA, KATHLEEN M
Address: 776 CREEK WAY CIR
City-St-Zip: BOLIVIA, NC 28422 US

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: KATHLEEN M BATTAGLIA D 01/29/2007
Electronic Signature of Signing Officer or Director Date