


# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Jan 23, 2006 8:00 am**  
**Secretary of State**

01-23-2006 90035 026 \*\*\*\*61.25

|  |  |   |
|--|--|---|
| <b>DOCUMENT # N99000003988</b>             |  |  |
| 1. Entity Name<br>GOD'S LITTLE LAMBS, INC. |  |   |

|   |   |
|---|---|
| Principal Place of Business<br>1100 NORTH ANDREWS<br>FORT LAUDERDALE, FL 33311 US | Mailing Address<br>1100 NORTH ANDREWS<br>FORT LAUDERDALE, FL 33311 US |
|---|---|

|  |              |                                      |              |
|--|--------------|--------------------------------------|--------------|
| 2. Principal Place of Business<br><i>Correct</i> |              | 3. Mailing Address<br><i>Correct</i> |              |
| Suite, Apt. #, etc.<br>-                         |              | Suite, Apt. #, etc.<br>-             |              |
| City & State<br>-                                |              | City & State<br>-                    |              |
| Zip<br>-   | Country<br>- | Zip<br>-                             | Country<br>- |

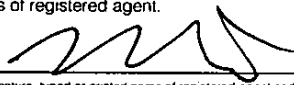


01172006 Chg-NP CR2E037 (11/05)

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|---|--|--|
| 4. FEI Number<br>65-0948619                               |  | Applied For<br><input type="checkbox"/> Not Applicable |
| 5. Certificate of Status Desired <input type="checkbox"/> |  | \$8.75 Additional Fee Required                         |

|  |  |  |  |
|--|--|--|--|
| 6. Name and Address of Current Registered Agent<br>BURTON, MARK C ESQ<br>4000 HOLLYWOOD BLVD<br>SUITE 705-S<br>HOLLYWOOD, FL 33321 |  | 7. Name and Address of New Registered Agent<br>Name<br>Street Address (P.O. Box Number is Not Acceptable)<br>City<br>FL Zip Code |  |
|--|--|--|--|


8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE  (NOTE: Registered Agent signature required when reinstating) DATE

|   |   |                                |  |
|---|---|--------------------------------|--|
| Filing Fee is \$61.25<br>Due by May 1, 2006 | 9. Election Campaign Financing<br>Trust Fund Contribution. <input type="checkbox"/> | \$5.00 May Be<br>Added to Fees | Make check payable to<br>Florida Department of State |
|---|---|--------------------------------|--|

| 10. OFFICERS AND DIRECTORS                     |   | 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 |   |
|--|---|---|---|
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | PD<br>GULLY, MADISON S<br>2624 NE 32ND ST. #218<br>FORT LAUDERDALE, FL 33306 <input checked="" type="checkbox"/> Delete | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP        | VPD Perry Canan<br>170 SE 6 Court<br>Pompano Bch., Fl. 33060 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition           |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | VPD<br>BURTON, MARK C<br>2400 NE 26TH TERR<br>FORT LAUDERDALE, FL 33311 <input type="checkbox"/> Delete                 | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP        | P<br>Burton, Mark C<br>2400 NE 26 Terr<br>Fort Lauderdale, Fl. 33311 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition   |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | T<br>WOOD, HARRY<br>361 NW 35 CT<br>FORT LAUDERDALE, FL 33309 <input type="checkbox"/> Delete                           | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP        | D<br>Wood, Harry<br>451 Heritage Dr. #1007<br>Pompano Beach, Fl. 33060 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | SD<br>DAVIS, SUE<br>4311 NE 33 STREET<br>FORT LAUDERDALE, FL 33319 <input type="checkbox"/> Delete                      | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP        | <input type="checkbox"/> Change <input type="checkbox"/> Addition   |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | D<br>WOOD, JOYCE<br>361 NW 35 CT<br>FORT LAUDERDALE, FL 33309 <input type="checkbox"/> Delete                           | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP        | Wood, Joyce<br>451 Heritage Dr. #1007<br>Pompano Beach, Fl. 33060 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition      |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | D<br>LEVERON, JACQUIE REV.<br>401 NW 20 ST.<br>FORT LAUDERDALE, FL 33311 <input checked="" type="checkbox"/> Delete     | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP        | T<br>Scherlach, Kathy<br>6212 Rose Terr.<br>Plantation, Fl. 33317 <input type="checkbox"/> Change <input type="checkbox"/> Addition                 |

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:  Mark C. Burton 1/16/2006 (954) 989-8725

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #