

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000006422

FILED
Jan 06, 2010
Secretary of State

Entity Name: CHILDREN'S ADVOCACY FOUNDATION, INC.

Current Principal Place of Business:

524 E. COLLEGE AVE.
TALLAHASSEE, FL 32301

New Principal Place of Business:

Current Mailing Address:

524 E. COLLEGE AVE.
TALLAHASSEE, FL 32301

New Mailing Address:

FEI Number: 59-3616363

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GIEVERS, KAREN ESQ
524 E. COLLEGE AVE.
TALLAHASSEE, FL 32301 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: PD
Name: GIEVERS, KAREN
Address: 524 E COLLEGE AVE #2
City-St-Zip: TALLAHASSEE, FL 32301

Title: VTSD
Name: BACH, FRANK J
Address: 524 E COLLEGE AVE #2
City-St-Zip: TALLAHASSEE, FL 32301

Title: D
Name: MEYER, RON
Address: 2544 BLAIRSTONEPINE DR
City-St-Zip: TALLAHASSEE, FL 32311

Title: D
Name: BROWN, GEORGE
Address: 3216 DEL RIO TERRACE
City-St-Zip: TALLAHASSEE, FL 32312

Title: D
Name: MCDEAVITT, GARY
Address: 822 SE 9TH ST
City-St-Zip: OKEECHOBEE, FL 34974

Title: D
Name: MCDEAVITT, ELIZABETH
Address: 822 SE 9TH ST
City-St-Zip: OKEECHOBEE, FL 34974

I hereby 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 all other like empowered.

SIGNATURE: KAREN GIEVERS

PD

01/06/2010

Electronic Signature of Signing Officer or Director

Date