2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000007191

Entity Name: CHILD AND FAMILY CONNECTIONS, INC.

FILED Jaņ 06, 2<u>00</u>6 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

3333 FOREST HILL BLVD.

WEST PALM BEACH, FL 33406 US

Current Mailing Address: New Mailing Address:

3333 FOREST HILL BLVD.

WEST PALM BEACH, FL 33406 US

FEI Number: 65-0978467 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

BARKER, ROBERT MCCARTHY, JOHN

3333 FOREST HILL BLVD 3333 FOREST HILL BLVD.

WEST PALM BEACH, FL 33406 US WEST PALM BEACH, FL 33406 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: JOHN MCCARTHY 01/06/2006

> Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

() Delete

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete (X) Change () Addition

DEMARK, DIANE ACKERMAN, JOE Name: Name: 1485 S SAMORAN BLVD Address: 515 N. FLAGLER DR. STE1800 Address:

City-St-Zip: WINTER PARK, FL 32792 City-St-Zip: WEST PALM BEACH, FL 33401 Title: Title: (X) Change () Addition

PATRICK, JAMES E Name: FRANKLIN, PATRICK Name: Address: 1485 S SEMORAN BLVD Address: 1700 N. AUSTRALIAN AVE City-St-Zip: WINTER PARK, FL 32792 City-St-Zip: WEST PALM BEACH, FL 33407

Title: () Delete Title: (X) Change () Addition MS.

BOCCABELLA, LOUIS HOFFMAN, PHYLLIS Name: Name: 311 SOUTH 2ND STREET 4605 COMMUNITY DR. Address: Address:

City-St-Zip: FORT PIERCE, FL 34950 City-St-Zip: WEST PALM BEACH, FL 33417

() Delete (X) Change () Addition Title: Title: MR. PELLIGRINO, LIZ Name: Name:

OLSHANSKY, HOWARD 311 SOUTH 2ND STREET Address: Address: 1201 AUSTRALIAN AVE. City-St-Zip: FORT PIERCE, FL 34950 City-St-Zip: RIVIERA BEACH, FL 33404

Title: (X) Delete Title: () Change () Addition

PRISCO, JO-ANN Name: Name: 311 SOUTH 2ND STREET Address: Address: City-St-Zip: FORT PIERCE, FL 34950 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: JOHN MCCARTHY MR. 01/06/2006

Electronic Signature of Signing Officer or Director

Date