

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000046148

FILED  
Apr 14, 2007  
Secretary of State

Entity Name: CHILDREN'S THERAPY NETWORK, INC.

## Current Principal Place of Business:

3930 S. NOVA RD. SUITE 305  
PORT ORANGE, FL 32127

## New Principal Place of Business:

2305 S. RIDGEWOOD AVE.  
STE. A  
EDGEWATER, FL 32141

## Current Mailing Address:

3930 S. NOVA RD. SUITE 305  
PORT ORANGE, FL 32127

## New Mailing Address:

2305 S. RIDGEWOOD AVE.  
STE. A  
EDGEWATER, FL 33141

FEI Number: 20-2576779

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

JOHNSON, GINA  
316 TWO OAKS DRIVE  
EDGEWATER, FL 32141 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

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PVST ( ) Delete  
Name: JOHNSON, GINA  
Address: 316 TWO OAKS DRIVE  
City-St-Zip: EDGEWATER, FL 32141

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: GINA JOHNSON

PRES

04/14/2007

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date