## 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P21863

Entity Name: CHILD FIND OF AMERICA, INC.

FILED Sep 04, 2008 Secretary of State

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Current Principal Place of Business:		New Principal Place of Business:	
	G CORNERS RD 9, NY 12528 US		
Current Mailing Address:		New Mailing Address:	
P.O. BOX 277 NEW PALTZ, N 125610277 US			
FEI Number: 22-2323336 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X) In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.			
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:			
SIEGEL, BE 10723 SW MIAMI, FL	104TH		
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:		ADDITION	S/CHANGES TO OFFICERS AND DIRECTORS:
Title: Name: Address: City-St-Zip:	D ( ) Delete MARKOVITS, GARY 224 SAN FERNANDO DRIVE LAVALLETTE, NJ 07835	Title: Name: Address: City-St-Zip:	D (X) Change ( ) Addition VASILEVICH, DEBBIE 4 APPALACHIAN EAST HOPEWELL JUNCTION, NY 12533
Title: Name: Address: City-St-Zip:	D () Delete NEUMANN, KENNETH 111 W 90TH ST, TOWNHOUSE B NEW YORK, NY 10024	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	P () Delete BAKER, ELIZABETH 40 REGGIES WAY LAGRANGEVILLE, NY 12540	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	D () Delete MATTER, ERIC 245 5TH AVE NEW YORK, NY 10016	Title: Name: Address: City-St-Zip:	D (X) Change ( ) Addition MALTER, ERIC 245 5TH AVE NEW YORK, NY 10016
Title: Name: Address: City-St-Zip:	D ( ) Delete LINDER, DONNA 243 MAIN STREET, SUITE 280 NEW PALTZ, NY	Title: Name: Address: City-St-Zip:	EDS (X) Change ( ) Addition LINDER, DONNA 21 S. ELTING CORNERS ROAD HIGHLAND, NY 12528
Title: Name: Address: City-St-Zip:	TVP ( ) Delete FINNEL, ARTHUR 4 COVE CT MOORESTOWN, NJ 08057	Title: Name: Address: City-St-Zip:	()Change ()Addition

I hereby certify that the information supplied with this filing does not qualify 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: DONNA LINDER EDS 09/04/2008