

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P21863

FILED
Mar 16, 2009
Secretary of State

Entity Name: CHILD FIND OF AMERICA, INC.

Current Principal Place of Business:

21 S ELTING CORNERS RD
HIGHLAND, NY 12528 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 277
NEW PALTZ, N 125610277 US

New Mailing Address:

FEI Number: 22-2323336

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

SIEGEL, BERNARD F.
10723 SW 104TH
MIAMI, FL 33176 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: D () Delete
Name: VASILEVICH, DEBBIE
Address: 4 APPALACHIAN EAST
City-St-Zip: HOPEWELL JUNCTION, NY 12533

Title: D () Delete
Name: NEUMANN, KENNETH
Address: 111 W 90TH ST, TOWNHOUSE B
City-St-Zip: NEW YORK, NY 10024

Title: P () Delete
Name: BAKER, ELIZABETH
Address: 40 REGGIES WAY
City-St-Zip: LAGRANGEVILLE, NY 12540

Title: D () Delete
Name: MALTER, ERIC
Address: 245 5TH AVE
City-St-Zip: NEW YORK, NY 10016

Title: EDS () Delete
Name: LINDER, DONNA
Address: 21 S. ELTING CORNERS ROAD
City-St-Zip: HIGHLAND, NY 12528

Title: TVP () Delete
Name: FINNEL, ARTHUR
Address: 4 COVE CT
City-St-Zip: MOORESTOWN, NJ 08057

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: TITENS, MICHAEL
Address: 1700 PACIFIC AVE, SUITE 3300
City-St-Zip: DALLAS, TX 75201

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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

03/16/2009

Electronic Signature of Signing Officer or Director

Date