UNIFORM BUSINESS REPORT (UBR)

_ UN	IIFORM BUSINES	S REPORT	(UBR)	_		
DOCUMENT # P39252				attempes		
1. Entity Name						
SOS CHILDREN'S VILLAGES-USA, INC.		No. year		FIL	EÐ	
Principal Plac	e of Business	Mailing Address		03 JAN 24	4 PM 4:51	
1317 F STREET NW 1317 F		317 F STREET NW		የተለተጠከፉ ነነ	/ /ዓመ ለም ኔ ምሳ	
		STE 550 Washington DC 20004		778137UIC 2274411XT	COFSTATE	
Principal Place of Business 3. Mail		Mailing Address				
Suite, Apt. #, etc.		Suite, Apt. #, etc.		CHECK HERE IF MAKING CHANGES		
City & State		City & State		4. FEI Number 13-6188433	-	plied For t Applicable
Zip Country		Zip	Country	5. Certificate of Status Desired	\$8.75 Add	itional
	6. Name and Address of Current Re	gistered Agent		7. Name and Address of New Re		
			Name Corporation Service Company			
UNITED CORPORATE SERVICES, INC. 9200 SOUTH DADELAND BLVD.			Street Address (P.O. Box Number is Not Acceptable) 1201 Hays Street			
SUITE 50			1201 Hay:	s street		
MIAMI FL 33156-0000			City		Zip Code	
8. The above named entity submits this statement for the purpose of changing its reg			Tállahas:	see	F B2301	and accent
	ions of registered agent.	e purpose or changing its reg	Jistered Office of Teglater	red agent, or both, in the blate of thor	da. Tan tannar war,	and docept
SIGNATURE LOOM 1-23.03						
SIGNATURE'S	Signature, printed page of registered agent and	title if applicable. (NOTE: Re	gistered Agent signature required	d when reinstating)	DATE	
W. T. W. T.		and the second		TO THE PERSON OF		300 0
	FILE NOW: FEE IS \$61.25	9. Election Campa Trust Fund Con			e Check Payable. a Department of S	
		Mastruma Com	, ibottori.	Added to Fees	a Department of S	
10.	OFFICERS AND DIREC		11. IIILE President	ADDITIONS/CHANGES TO OFFICER		
TITLE NAME	S Shapiro, Mary Jo	🖾 Delete	NAME Dirk Loh		Change .	☐ Addition
STREET ADDRESS	1100 NEW YORK AVE.		STREET ADDRESS 225	N.Michigan Ave., Sud	lte 800	
CITY-ST-ZIP	WASH DC 20005		CITY-ST-ZIP Chicas			
TITLE NAME	D Stevens, John	X Delete	TITLE Vice Pres	ident Newman	Change	X Addition
STREET ADDRESS	835 POLO LANE			5 Heron Bay Blvd., S	Suite 300	
CITY-ST-ZIP	GLENVIEW IL 60611		City-St-zip Pompane	o Beach, FL 33076		·
TITLE NAME	Dugan, Huth T Mr	Delete	IITLE Treasure:	r	Change	Addition
STREET ADDRESS	433 E 51ST STREET APT 8-D	,	STREET ADDRESS (* S.	kender 1 Poberts Road		
CITY-\$T-ZIP	NEW YORK NY 10022-6472			Roberts Road Hills, IL 60465	<u> </u>	
TITLE NAME	P FOLSOM, SUZANNE R MS	[X] Delete	TITLE Secretary Christian	y Gruenler T Strasse 23	💢 Change	☐ Addition
STREET ADDRESS	O'MELVENY & MEYERS, 555 13TH	ST NW	STREET ADDRESS 8063	8 Muchen		
CITY-ST-ZIP	WASHINGTON D. 20004		CITY-ST-ZIP German	ny 011/49/89/179_142		
TITLE NAME	D AGUSTA, STEFANIE	🔀 Delete		xecutive Director	☐ Change	Addition
STREET ADDRESS	1223 N. STUART ST		STREET ADDRESS WAS NOT	er Zappia ngton, BC,20004 ^{Suite}	≥ 500	
CITY-ST-ZIP	ARLINGTON VA 22201	- <u>F F F S S S S S S S S S S S S S S S S </u>	CITY-ST-ZIP	1 20 2000-		
TITLE NAME	D Klein, James	☐ Delete	TITLE NAME	C)	☐ Change	☐ Addition
STREET ADDRESS	510 S.ELMRIDGE AVE		STREET ADDRESS	2000106 :	99372	
CITY-ST-ZIP	BROOKFIELD WI 53005	<u> </u>	CITY-ST-ZIP			
		dice and a contract		ection 119.07(3)(i), Florida Statutes. I		

12. I nereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes, i further certify that the information indicated on this report or supplemental report is tryle and accurate and that my 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 trusted empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address with all other like empowered.

Christopher Zappia

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/22/03

(202) 347-7920



ACCOUNT NO. : 072100000032

REFERENCE :

COST LIMIT : \$ 61.25

ORDER DATE: January 23, 2003

ORDER TIME: 10:43 AM

ORDER NO. : 904844-050

CUSTOMER NO: 7347970

CUSTOMER: Mr. Christopher Zappia

Sos Children's Villages-usa

1317 F Street, Nw

Washington, DC 20004

ANNUAL REPORT FILING

NAME:

SOS CHILDREN'S VILLAGES-USA,

INC.

XX ANNUAL REPORT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

_ CERTIFIED COPY PLAIN STAMPED COPY

___ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Troy Todd - Ext. 1140

EXAMINER'S INITIALS: