

2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N09000000986

Entity Name: THE BAHIA CHILDREN'S FOUNDATION, INC.**Current Principal Place of Business:**580 MAJESTIC OAK DRIVE
APOPKA, FL 32712**Current Mailing Address:**580 MAJESTIC OAK DRIVE
APOPKA, FL 32712**FEI Number:** NOT APPLICABLE**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**WEATHERFORD, WILLIAM PJR
1150 LOUISIANA AVENUE
SUITE 4
WINTER PARK, FL 32789 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:**_____
Electronic Signature of Registered Agent_____
Date**Officer/Director Detail :**Title D
Name SWOPE, SAMUEL G
Address 3135 TALA LOOP
City-State-Zip: LONGWOOD FL 32779Title D
Name ROSSI, ANTHONY W
Address 580 MAJESTIC OAK DRIVE
City-State-Zip: APOPKA FL 32712Title D
Name DAVID, JOHN N
Address 2434 SWEETWATER COUNTRY CLUB
DR
City-State-Zip: APOPKA FL 32712Title D
Name GAMINA, JON T
Address 185 RIVER OAK CIRCLE
City-State-Zip: SANFORD FL 32771Title D
Name BERGENSKE, GARY
Address 236 FLAME AVENUE
City-State-Zip: MAITLAND FL 32751

I hereby 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 all other like empowered.

SIGNATURE: ANTHONY W ROSSI

D

03/07/2013

Electronic Signature of Signing Officer/Director Detail_____
Date