

**2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N22000013794

**Entity Name:** FOR THE CHILDREN NETWORK INC.

**Current Principal Place of Business:**

1201 SE SANDDOLLAR LANE  
STUART, FL 34996

**Current Mailing Address:**

1201 SE SANDDOLLAR LANE  
STUART, FL 34996

**FEI Number:** 92-1746441

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

BROMFIELD, MARGARET A  
1201 SE SANDDOLLAR LANE  
STUART, FL 34996 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 PRES  
Name BROMFIELD, MARGARET  
Address 1201 SE SANDDOLLAR LANE  
City-State-Zip: STUART FL 34996

Title MEM  
Name MCCURDY, EVERTON  
Address 2175 BOULEVARD  
City-State-Zip: WEST HARTFORD CT 06107

Title MEM  
Name BROMFIELD, STEPHANIE  
Address 1201 SE SANDDOLLAR LANE  
City-State-Zip: STUART FL 34996

Title S/TR  
Name MEGGIE, SHANTOL  
Address 261 SW ELDERBERRY  
City-State-Zip: PORT ST LUCIE FL 34953

Title MEM  
Name JOHNSON, DESMOND  
Address 360 W PLEASANTVIEW AVE, APT 800N  
City-State-Zip: HACKENSACK NJ 07601

Title MEM  
Name GREAVES-SNYDER, TEIKA  
Address 4737 HEARTHSIDE DR  
City-State-Zip: ORLANDO FL 32837

*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:** MARGARET A BROMFIELD

**PRES**

**04/03/2024**

Electronic Signature of Signing Officer/Director Detail

Date