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Secretary of State

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NONPROFIT CORPORATION ANNUAL REPORT 1999		FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P31634
 1. Corporation Name
CHILDREN AWAITING PARENTS, INC.

Principal Place of Business 700 EXCHANGE ST. ROCHESTER NY 14608	Mailing Address 700 EXCHANGE ST. ROCHESTER NY 14608
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2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country	2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country	3. Date Incorporated or Qualified 09/19/1990	4. FEI Number 16-1047933	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required		
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		\$5.00 May Be Added to Fees		

9. Name and Address of Current Registered Agent

REID, CHRISTINE
851 BILLSBOROUGH ROAD
GENEVA FL 32732

10. Name and Address of New Registered Agent

81 Name
 82 Street Address (P.O. Box Number is Not Acceptable)
 83
 84 City
 85 Zip Code **FL**

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE P	NAME PARKER, JOYCE STREET ADDRESS 267 MULBERRY ST. CITY-ST-ZIP ROCHESTER NY	1.1 TITLE P	Change <input checked="" type="checkbox"/> Addition <input type="checkbox"/> Ely, Michele 444 River Heights Rochester, NY 14612
TITLE V	NAME MARX, FRANCES STREET ADDRESS 80 NUNDA BLVD CITY-ST-ZIP ROCHESTER NY	2.1 TITLE VP	Change <input checked="" type="checkbox"/> Addition <input type="checkbox"/> Robert W. Hunter 10 Duke St Rochester NY 14605
TITLE T	NAME ENSMAN, RICHARD STREET ADDRESS 184 AUTUMN CHAPEL WAY CITY-ST-ZIP ROCHESTER NY	3.1 TITLE T	Change <input type="checkbox"/> Addition <input type="checkbox"/> Ensmann, Richard 184 Autumn Chapel Way Rochester NY
TITLE D	NAME BLAKE, ROBERT W STREET ADDRESS 242 W. MAIN ST. CITY-ST-ZIP ROCHESTER NY	4.1 TITLE S	Change <input type="checkbox"/> Addition <input checked="" type="checkbox"/> Rosenbloom, Richard 2400 Chase Square Rochester, NY 14604
TITLE D	NAME ELY, MICHELE STREET ADDRESS 222 WESTMINSTER RD CITY-ST-ZIP ROCHESTER NY	5.1 TITLE D	Change <input checked="" type="checkbox"/> Addition <input type="checkbox"/> Parker Joyce 267 Mulberry St Rochester, NY 14620
TITLE D	NAME BLAKE, ROBERT STREET ADDRESS 242 W. MAIN ST. CITY-ST-ZIP ROCHESTER NY	6.1 TITLE D	Change <input type="checkbox"/> Addition <input type="checkbox"/> Blake, Robert 242 W. Main St. Rochester, NY 14614

14. I hereby 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 annual report or supplemental annual report is true 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 trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Peggy Squire DATE: 1/20/99 DAYTIME PHONE #: 716/232-5710

CR2E037 (11/98)