

**2004 FOR PROFIT CORPORATION
ANNUAL REPORT (AR)**

FILED
Jan 29, 2004 8:00 am
Secretary of State

01-29-2004 90077 010 ***158.75

DOCUMENT # 439844

1. Entity Name

WITH COMMUNITY SERVICES, INC.



Principal Place of Business

4733 W ATLANTIC AVE
BLDG C-21
DELRAY BEACH FL 33445
US

Mailing Address

4733 W ATLANTIC AVE
BLDG C-21
DELRAY BEACH FL 33445
US

2. Principal Place of Business

14000 N. MILITARY TR

Suite, Apt. #, etc.

200

City & State

DELRAY BEACH, FL

Zip

33484-2600

Country

PALM BCH

3. Mailing Address

14000 N. MILITARY TR

Suite, Apt. #, etc.

200

City & State

DELRAY BEACH, FL

Zip

33484-2600

Country

PALM BCH



MOORE

CR2E034 (11/03)

4. FEI Number

59-1474270

Applied For

Not Applicable

5. Certificate of Status Desired



\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

NAWALANY, MICHAEL W
4733 W ATLANTIC AVE
SUITE C-21
DELRAY BEACH FL 33445

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

14000 N. MILITARY TR # 200

City

DELRAY BEACH

FL

Zip Code

33484-2600

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature of registered agent or authorized officer and fee if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

1-23-04

FILE NOW!!! FEE IS \$150.00

After May 1, 2004 Fee will be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution.



\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE D ☐ Delete

NAME GALLO, CARL R
STREET ADDRESS 4733 W ATLANTIC AVE BLDG C-21
CITY-ST-ZIP DELRAY BEACH FL 33445

TITLE P ☐ Delete

NAME MORICI, HERBERT
STREET ADDRESS 4733 W ATLANTIC AVE, C-4
CITY-ST-ZIP DELRAY BEACH FL 33445

TITLE ☐ Delete

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete

NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☒ Change ☐ Addition

NAME 14000 N. MILITARY TR # 200
STREET ADDRESS DELRAY BEACH, FL 33484-2600
CITY-ST-ZIP

TITLE ☒ Change ☐ Addition

NAME 14000 N. MILITARY TR # 200
STREET ADDRESS DELRAY BEACH, FL 33484-2600
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition

NAME
STREET ADDRESS
CITY-ST-ZIP

12. 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 report or supplemental 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 607, 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.

SIGNATURE:

Carl R Gallo

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CARL R GALLO

1-23-04

Date

Daytime Phone #

637-6011