

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 719104

FILED  
Apr 10, 2006  
Secretary of State

Entity Name: LEON F. STEWART - HAL S. MARCHMAN CENTER, INC.

**Current Principal Place of Business:**

3875 TIGER BAY ROAD  
DAYTONA BCH, FL 32124 US

**New Principal Place of Business:**

**Current Mailing Address:**

3875 TIGER BAY RD  
DAYTONA BCH, FL 32124 US

**New Mailing Address:**

FEI Number: 59-1295986      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

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

CANTLEY, ERNEST D  
3875 TIGER BAY RD  
DAYTONA BEACH, FL 32174 US

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

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

**OFFICERS AND DIRECTORS:**

Title: T ( ) Delete  
Name: DENIGHT, WILLIAM  
Address: 1420 N. ATLANTIC AVE, #904  
City-St-Zip: DAYTONA BEACH, FL 32118 US

Title: D ( ) Delete  
Name: SERBOUSEK, TED  
Address: P.O. BOX 751 N/A  
City-St-Zip: DAYTONA BEACH, FL 32114 US

Title: CHAI ( ) Delete  
Name: PYLE, MICHAEL  
Address: 1655 N. CLYDE MORRIS BLVD, SUITE 1  
City-St-Zip: DAYTONA BEACH, FL 32117 US

Title: D ( ) Delete  
Name: MIDDLETON, MYRA  
Address: 27 MOONTALK LN  
City-St-Zip: PALM COAST, FL 32164 US

Title: D ( ) Delete  
Name: CAMPBELL-BAKER, LORI  
Address: 126 E. ORANGE AVE  
City-St-Zip: DAYTONA BEACH, FL 32114 US

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: D (X) Change ( ) Addition  
Name: SERBOUSEK, TED  
Address: P.O. BOX 751  
City-St-Zip: DAYTONA BEACH, FL 32114 US

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: D ( ) Change (X) Addition  
Name: ROSARIA, UPCHURCH  
Address: 7 BROADRIVER ROAD  
City-St-Zip: ORMOND BEACH, FL 32174 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: MICHAEL PYLE

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

CHAI

04/10/2006

\_\_\_\_\_  
Date