

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 732111

FILED
Apr 28, 2010
Secretary of State

Entity Name: WAYSIDE HOUSE, INC.

Current Principal Place of Business:

378 N.E. 6TH AVENUE
DELRAY BEACH, FL 33483

New Principal Place of Business:

Current Mailing Address:

378 N.E. 6TH AVENUE
DELRAY BEACH, FL 33483

New Mailing Address:

FEI Number: 59-1590644

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

THISTLE, J. JEFFERY
30 SE 4TH AVE
DELRAY BEACH, FL 33483 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: PD
Name: O'NEAL, PERRY H
Address: 588 BANYAN RD.
City-St-Zip: GULF STREAM, FL 33483

Title: SD
Name: BACKER, BARBARA G
Address: 620 SO. OCEAN BLVD.
City-St-Zip: DELRAY BEACH, FL 33483

Title: TD
Name: ARCHER, PATRICIA L
Address: 380 SHERWOOD FOREST DR.
City-St-Zip: DELRAY BEACH, FL 33445

Title: MD
Name: FRICK, GEORGE
Address: 800 ANDREWS AVE APT 4
City-St-Zip: DELRAY BEACH, FL 33483

Title: ATD
Name: STRYKER, PIETER
Address: 2205 S. OCEAN BLVD.
City-St-Zip: FORT PIERCE, FL 34950

Title: ED
Name: REECE, JILL LICDC
Address: 378 NE 6 AVENUE
City-St-Zip: DELRAY BEACH, FL 33483

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: JILL W. REECE,CAP, CMHP, LPC

ED

04/28/2010

Electronic Signature of Signing Officer or Director

Date