


**2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Feb 15, 2008 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # 745923</b> 1. Entity Name MULBERRY COMMUNITY SERVICE CENTER, INC.	
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Principal Place of Business 301 NE 5TH ST MULBERRY, FL 33860	Mailing Address 301 NE 5TH ST MULBERRY, FL 33860
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**DO NOT WRITE IN THIS SPACE**



02082008 No Chg-NP CR2E037 (4/06)

4. FEI Number 59-1896141	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required

6. Name and Address of Current Registered Agent

HOWARD, STEPHEN  
 3992 LAUREL CREST DR  
 MULBERRY, FL 33860

**DO NOT WRITE IN THIS SPACE**

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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reappointing) \_\_\_\_\_ DATE \_\_\_\_\_

Filing Fee is \$61.25 Due by May 1, 2008	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DORSETT, AL 262 WOOD HALL DRIVE MULBERRY, FL 33860
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T ALBRITTON, JANET 400 N CHURCH AVE MULBERRY, FL 33860
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D JACKSON, ELNORA C 211 GREENWOODS DR LAKELAND, FL 33813
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SIMMONS, CAROLYN 208 NW 2ND ST. MULBERRY, FL 33860
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BAKER, ROOSEVELT 406 BADCOCL BLVD MULBERRY, FL 33860
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SMITH, COLLIN 601 NW 2ND ST. MULBERRY, FL 33860

U00000829546  
 02/26/08-80044-023 61.25

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

**SIGNATURE:** Stephen D. Howard Stephen D. Howard 2/11/08 863-205-1259

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #