2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#756175

FILED Jan 13, 2006 Secretary of State

Entity Name: EXCHANGE CLUB CENTER FOR THE PREVENTION OF CHILD ABUSE OF THE TREASURE COAST,

Current Principal Place of Business: New Principal Place of Business:

3525 W MIDWAY RD

FT PIERCE, FL 34981 US

Current Mailing Address: New Mailing Address:

P O BOX 12908

FT PIERCE, FL 34979 US

FEI Number: 59-2094472 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

DEROSS, JOSEPH 401 S INDIAN RIVER DR FT PIERCE, FL 34950

OFFICERS AND DIRECTORS:

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:

Date

Electronic Signature of Registered Agent

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete (X) Change () Addition DILLNAN, MICHAEL Name: DILLMAN, MICHAEL Name:

301 E. OCEAN BLVD Address: 501 ORANGE AVENUE Address: City-St-Zip: STUART, FL 34994 City-St-Zip: FORT PIERCE, FL 34994 US

Title: PD Title: **PPRE** () Delete (X) Change () Addition

FORT, AL Name: FORT, AL Name: Address: PO BOX 249 Address: PO BOX 249

City-St-Zip: FT. PIERCE, FL 34956 City-St-Zip: FT. PIERCE, FL 34956 US

Title: () Delete Title: (X) Change () Addition

DONADIO, ANTHONY GEHRIG, ROBERT Name: Name: 2125 WINDWARD WAY #205 1405 S. 25TH STREET Address: Address: City-St-Zip: VERO BEACH, FL 32963 City-St-Zip: FORT PIERCE, FL 34947 US

Title: () Delete Title: (X) Change () Addition

DUNWOODY, ROBERT HARTLEY, JAMES Name: Name: 1700 S 23RD STREET Address: 2222 COLONIAL ROAD #200 Address: City-St-Zip: FORT PIERCE, FL 34950 City-St-Zip: FORT PIERCE, FL 34950

Title: () Delete Title: () Change () Addition

TILLEY, JEANETTE T Name: Name: 300 NW PEACOCK BLVD. Address: Address: City-St-Zip: PORT SAINT LUCIE, FL 34986 City-St-Zip:

Title: () Delete Title: () Change () Addition

SCHWEIGER, ROBERT Name: Name: Address: 9732 SW SANTA MONICA DR. Address: PALM CITY, FL 34990 City-St-Zip: City-St-Zip:

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: THERESA GARBARINO - MAY 0 01/13/2006