2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F94000004347

FILED Jul 14, 2006 Secretary of State

Entity Name: EAST COAST MIGRANT HEAD START PROJECT, INC.

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

131 3RD STREET SW 3700 DMG DRIVE

2ND FLOOR LAKELAND, FL 33811 US

WINTER HAVEN, FL 33880 US

New Mailing Address: **Current Mailing Address:**

131 3RD STREET SW 3700 DMG DRIVE

2ND FLOOR LAKELAND, FL 33811 US WINTER HAVEN, FL 33880 US

FEI Number: 52-1020023

FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

PHILLIPS, GLEN FINNEGAN, JAMES 131 THIRD STREET SW 3700 DMG DRIVE

LAKELAND, FL 33811 US 2ND FLOOR

WINTER HAVEN, FL 33880 US

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: JAMES FINNEGAN 07/14/2006

> Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change () Addition () Delete FREUDENBERG, S KATHRYN FREUDENBERG, S KATHRYN Name: Name:

204 EAST HOLLY AVENUE Address: 35 PELHAM DRIVE Address: City-St-Zip: SEWELL, NJ 08080 City-St-Zip: MANTUA, NJ 08051

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

Name: SEWELL, JONI BERRIOS Name: MARTIN, JANE S PH.D. Address: 15469 CHLOE CIRCLE Address: 2027 STONE BROOK DRIVE City-St-Zip: FORT MYERS, FL 33908 City-St-Zip: BIRMINGHAM, AL 35242

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

WILLIAMS, MALCOLM B Name: VILLA, JOSE S PH.D. Name: 5974 CRISTOPHER LANE 1136 BROOKSIDE DRIVE Address: Address: City-St-Zip: LITHONIA, GA 300585654 City-St-Zip: NEWARK, OH 43055

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: S. KATHRYN FREUDENBERG Ρ 07/14/2006