

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F94000004347

FILED
Jan 16, 2007
Secretary of State

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

Current Principal Place of Business:

3700 DMG DRIVE
LAKELAND, FL 33811 US

New Principal Place of Business:

Current Mailing Address:

3700 DMG DRIVE
LAKELAND, FL 33811 US

New Mailing Address:

FEI Number: 52-1020023 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

FINNEGAN, JAMES
3700 DMG DRIVE
LAKELAND, FL 33811 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: P () Delete
Name: FREUDENBERG, S KATHRYN
Address: 35 PELHAM DRIVE
City-St-Zip: MANTUA, NJ 08051

Title: S () Delete
Name: MARTIN, JANE S PH.D.
Address: 2027 STONE BROOK DRIVE
City-St-Zip: BIRMINGHAM, AL 35242

Title: VP () Delete
Name: VILLA, JOSE S PH.D.
Address: 1136 BROOKSIDE DRIVE
City-St-Zip: NEWARK, OH 43055

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

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

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: FREUDENBERG, KATHRYN S
Address: 35 PELHAM DRIVE
City-St-Zip: MANTUA, NJ 08051

Title: SEC (X) Change () Addition
Name: MARTIN, JANE S PH.D.
Address: 2027 STONE BROOK DRIVE
City-St-Zip: BIRGMINGHAM, AL 35242

Title: VP (X) Change () Addition
Name: VILLA, JOSE S PH.D.
Address: 1136 BROOKSIDE DRIVE
City-St-Zip: NEWARD, OH 43055

Title: TREA () Change (X) Addition
Name: HALL, ANDREW H
Address: P.O. BOX 352
City-St-Zip: MOORESTOWN, NJ 08057

Title: PCP () Change (X) Addition
Name: MORICE, MARIA
Address: 11944 S.W. 273RD STREET
City-St-Zip: HOMESTEAD, FL 33032

Title: IT () Change (X) Addition
Name: BAKER, IDA M
Address: 110 HACKAMORE LANE
City-St-Zip: WARNER ROBBINS, GA 31088

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: BARBARA RICKETTS

DOF

01/16/2007

Electronic Signature of Signing Officer or Director

_____ Date