2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000005438

FILED May 18, 2006 Secretary of State

DOCOM	ENT# N0000000436		Secretary of State	
Entity Nan	ne: CENTURY HEALTH CARE ACCESS, INC.			
Current Principal Place of Business:		New Principal Place	New Principal Place of Business:	
7600 MAYO CENTURY				
Current Mailing Address:		New Mailing Addres	New Mailing Address:	
P.O. BOX 2 CENTURY				
FEI Number: In accordance	20-2860050 FEI Number Applied For() FE e with s. 607.193(2)(b), F.S., the corporation did not rece	Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address of New Registered Agent:	
806 LAKÉV PENSACO	LA, FL 32507 US	co of changing its registers	ad affice ar registered agent, or both	
in the State	named entity submits this statement for the purpor of Florida.	se of changing its register	ed office of registered agent, or both,	
SIGNATUR	RE:			
Electronic Signature of Registered Agent			Date	
OFFICERS AND DIRECTORS:		ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	DC () Delete CASSIDY, STEPHANIE P.O. BOX 266 CENTURY, FL 32535	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	DT () Delete RAAP, CAROLYN P.O. BOX 306 FLOMATON, AL 36441	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	DS () Delete BROWN, IMOGENE 080 39TH ST. ASHLAND, KY 41101	Title: Name: Address: City-St-Zip:	() Change () Addition	

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: STEPHANIE CASSIDY DC 05/18/2006