2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 10, 2012
Secretary of State

DOCUMENT# N10000006779

Entity Name: TREASURE COAST COMMUNITY IMPACT CENTER, INC.

Current Principal Place of Business:

1819 SW NEWPORT ISLES BOULEVARD
PORT SAINT LUCIE, FL 34953

New Principal Place of Business:

Current Mailing Address:

1819 SW NEWPORT ISLES BOULEVARD
PORT SAINT LUCIE, FL 34953

New Mailing Address:

FEI Number: 27-3096393 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CHATMAN, KHALILAH C
1819 SW NEWPORT ISLES BOULEVARD
PORT SAINT LUCIE, FL 34953 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: PTD
Name: CHATMAN, JAMES R
Address: 1819 SW NEWPORT ISLES BOULEVARD
City-St-Zip: PORT SAINT LUCIE, FL 34953

Title: D
Name: EATON, GREGORY
Address: 5342 EADIE PLACE
City-St-Zip: WEST PALM BEACH, FL 33407

Title: D
Name: LESLEY, JOHN
Address: 1833 SW ANGELICO LANE
City-St-Zip: PORT ST. LUCIE, FL 34984

Title: SD
Name: JAMES, PEDIEDRA R
Address: 3300 RJ HENDLEY AVENUE
City-St-Zip: RIVIERA BEACH, FL 33404

I hereby 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 all other like empowered.

SIGNATURE: JAMES R. CHATMAN PTD 03/10/2012

Electronic Signature of Signing Officer or Director — Date