2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 23, 2005
Secretary of State

DOCUMENT# N40825

Entity Name: CHARIS CENTER, INC.

Current Principal Place of Business:

4041 BAHIA VISTA STREET
SARASOTA, FL 342322421

New Principal Place of Business:

Current Mailing Address:

4041 BAHIA VISTA STREET
SARASOTA, FL 342322421

New Mailing Address:

FEI Number: 65-0235200 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

DENLINGER, GLEN
4041 BAHIA VISTA ST
SARASOTA, FL 34232 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: T ( ) Delete
Name: BEACHEY, DALE
Address: 4929 OLD CREEK DR
City-St-Zip: SARASOTA, FL 34233

Title: C ( ) Delete
Name: SCHLABACH, NAOMI
Address: 5885 IBIS ST
City-St-Zip: SARASOTA, FL 34231

Title: SD ( ) Delete
Name: HENRY-RINEHART, JAN REV.
Address: 700 E DEARBORN ST
City-St-Zip: ENGLEWOOD, FL 34223

Title: DV ( ) Delete
Name: KIRACOFE, BARBARA
Address: 4341 DRESDEN LN
City-St-Zip: SARASOTA, FL 34233

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: NAOMI SCHLABACH C 02/23/2005

Electronic Signature of Signing Officer or Director — Date