

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000004556

FILED
Sep 16, 2010
Secretary of State

Entity Name: SECOND CHANCE RESOURCE CENTER, INC.

Current Principal Place of Business:

750 S. ORANGE BLOSSOM TRAIL
SUITE 226
ORLANDO, FL 32805

New Principal Place of Business:

399 RAILROAD AVE
WINTER GARDEN, FL 34787

Current Mailing Address:

PO BOX 555058
ORLANDO, FL 328555058

New Mailing Address:

PO BOX 783502
WINTER GARDEN, FL 34778

FEI Number: 59-3458402

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LYLES, SHARON
399 RAILROAD AVE
WINTER GARDEN, FL 34787 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
Name: LYLES, SHARON
Address: 399 RAILROAD AVE
City-St-Zip: WINTER GARDEN, FL 34787

Title: VP
Name: GABRIELLE, RANDLE
Address: POST OFFICE BOX 682945
City-St-Zip: ORLANDO, FL 34787

Title: S
Name: STEVENSON, SHERIAN
Address: 1227 MERRIMACK DR
City-St-Zip: DAVENPORT, FL 33897

Title: T
Name: RODGERS, DIANA
Address: PO BOX 555058
City-St-Zip: ORLANDO, FL 328555058

Title: B
Name: MARJORIE, COLLINS
Address: PO BOX 783502
City-St-Zip: WINTER GARDEN, FL 34778

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: SHARON LYLES

P

09/16/2010

Electronic Signature of Signing Officer or Director

Date