2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N9800000398

FILED Mar 01, 2005 Secretary of State

Entity Name: SOUTH COUNTY PEOPLE FOR LIFE, INC.

Current Principal Place of Business: New Principal Place of Business: 642 N AUBURN RD VENICE, FL 34292 **Current Mailing Address: New Mailing Address:** 642 N AUBURN RD VENICE, FL 34292 FEI Number: 65-0810978 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: THOMAS, PAUL THOMAS, PAUL 304 OAKWOOD DR S 283 FARÉHAM DR. ENGLEWOOD, FL 34223 US US VENICE, FL 34293 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: 03/01/2005 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition () Delete DOLBY, DWIGHT L Name: Name: 642 N. AUBURN ROAD Address: Address: City-St-Zip: VENICE, FL 34292 City-St-Zip: Title: () Delete Title: (X) Change () Addition Name: THOMAS, CAROLYN Name: THOMAS, CAROLYN Address: 304 OAKWOOD DR S. Address: 283 FAREHAM DR. City-St-Zip: ENGLEWOOD, FL 34223 City-St-Zip: VENICE, FL 34293 Title: () Delete Title: () Change () Addition CHAPLIN, JENNIFER Name: Name: 1508 HIGHLAND ST. Address: Address: City-St-Zip: NOKOMIS, FL 34275 City-St-Zip: Title: P/D () Delete Title: () Change () Addition Name: FERREIRA, JOSEPH Name: 1325 POPLAR AVE. Address: Address: City-St-Zip: VENICE, FL 34292 City-St-Zip: Title: VP/D () Delete Title: VP/D (X) Change () Addition THOMAS, PAUL THOMAS, PAUL Name: Name: 304 OAKWOOD DR. S. 283 FAREHAM DR. Address: Address: VENICE, FL 34293 City-St-Zip: ENGLEWOOD, FL 34223 City-St-Zip: Title: () Delete Title: () Change () Addition O'DONNELL, BARBARA Name: Name: Address: 1680 THOMAS ST. Address: ENGLEWOOD, FL 34223 City-St-Zip: 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: JENNIFER CHAPLIN T 03/01/2005