2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 701766

FILED Feb 12, 2009 Secretary of State

Entity Name: THE ARC SANTA ROSA, INC.

Current Principal Place of Business: New Principal Place of Business:

6225 DIXIE ROAD MILTON, FL 32570

Current Mailing Address: New Mailing Address:

6225 DIXIE ROAD MILTON, FL 32570

FEI Number: 59-1862936 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

SMITH, ANN 6225 DIXIE RD MILTON, FL 32570 US

OFFICERS AND DIRECTORS:

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

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ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Delete Title: P (X) Change () Addition

Name: BARBER, KAREN Name: DAVIS, PAM
Address: 5272 CRYSTAL CREEK DRIVE Address: 5300 CRYSTAL CREEK DRIVE

City-St-Zip: PACE, FL 32571 City-St-Zip: PACE, FL 32571

Title: V () Delete Title: V (X) Change () Addition Name: DAVIS, PAM Name: GOSS, DEBBIE

Address: 5300 CRYSTAL CREEK DRIVE Address: 4728 RIDGE POINT DRIVE

City-St-Zip: PACE, FL 32571 City-St-Zip: PACE, FL 32571

Title: S () Delete Title: S (X) Change () Addition Name: ROLLO, RODNEY Name: JERILYN, HUGHES

Address: 5487-A MILLSTONE CIRCLE Address: 4704 HENRY WILSON CREEK DRIVE

City-St-Zip: MILTON, FL 32570 City-St-Zip: MILTON, FL 32583

Title: T () Delete Title: () Change () Addition

 Name:
 ORAM, STEPHANIE
 Name:

 Address:
 4910 PATTOCK DRIVE
 Address:

 City-St-Zip:
 PACE, FL 32571
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: ANN SMITH E D 02/12/2009