

2007 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
May 31, 2007
Secretary of State

DOCUMENT# 712001

Entity Name: PRESBYTERIAN SPECIAL SERVICES, INC.**Current Principal Place of Business:**3395 GRAND AVENUE
GLENWOOD, FL 32722**New Principal Place of Business:****Current Mailing Address:**P.O. BOX 220036
GLENWOOD, FL 32722**New Mailing Address:****FEI Number:** 59-1159090**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**CALDWELL, SARA
3395 N. GRAND AVE.
GLENWOOD, FL 32722 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:** ST () Delete
Name: MARTIN, WILMA
Address: P.O. BOX 1913
City-St-Zip: DELAND, FL 32119 US**Title:** C () Delete
Name: HENRY, TERRANCE
Address: 701 PELICAN BAY DR.
City-St-Zip: DAYTONA BEACH, FL 32119 US**Title:** D () Delete
Name: BRUNS, CAROLLE
Address: 40 MEADOWOOD TRAIL
City-St-Zip: DELAND, FL 32724 US**Title:** D () Delete
Name: MARTIN, WILMA
Address: 1351 GREENLAND TERRANCE
City-St-Zip: DELAND, FL 32720 US**Title:** D () Delete
Name: CALDWELL, SARA
Address: P.O. BOX 2023
City-St-Zip: DAYTONA BEACH, FL 32118 US**Title:** D () Delete
Name: YEH, CHARLES
Address: 2455 PROVENCE CIRCLE
City-St-Zip: WESTON, FL 33327 US**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** () Change () Addition
Name:
Address:
City-St-Zip:**Title:** C (X) Change () Addition
Name: HENRY, TERENCE M
Address: 701 PELICAN BAY DR.
City-St-Zip: DAYTONA BEACH, FL 32119 US**Title:** VC (X) Change () Addition
Name: WALSH, MICHAEL
Address: 149 E INTERNATIONAL SPEDWAY DR
City-St-Zip: DAYTONA BEACH, FL 32118 US**Title:** ADM (X) Change () Addition
Name: HILL, CHRISTOPHER
Address: 1521 NORTH BEACH STREET
City-St-Zip: ORMOND BEACH, FL 32174 US**Title:** CFO (X) Change () Addition
Name: JONES, MARTIN
Address: 527 MOCKINGBIRD COURT
City-St-Zip: LAKE MARY, FL 32746 US**Title:** () Change () Addition
Name:
Address:
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: MARTIN JONES

CFO

05/31/2007

Electronic Signature of Signing Officer or Director

Date