

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 726004

FILED  
Apr 06, 2006  
Secretary of State

**Entity Name:** COMMUNITY COORDINATED CARE FOR CHILDREN, INC.

**Current Principal Place of Business:**

3500 W COLONIAL DR  
ORLANDO, FL 32808 US

**New Principal Place of Business:**

**Current Mailing Address:**

3500 W COLONIAL DR  
ORLANDO, FL 32808 US

**New Mailing Address:**

**FEI Number:** 59-1371754

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

HARDY, W. MARVIN III ESQ.  
1000 LEGION PLACE  
SUITE 1700  
ORLANDO, FL 32801 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: CD ( ) Delete  
Name: PRYOR, DEE ANNA  
Address: 1031 W. MORSE BLVD SUITE 200  
City-St-Zip: WINTER PARK, FL 32789 US

Title: VCD ( ) Delete  
Name: REGULES, PETER  
Address: 3334 BISHOP PARK DRIVE #538  
City-St-Zip: WINTER PARK, FL 32792 US

Title: MD ( ) Delete  
Name: FRANK, PATRICIA E  
Address: 3500 W. COLONIAL DR  
City-St-Zip: ORLANDO, FL 32808 US

Title: TD ( ) Delete  
Name: HOLLERBACH, LINDA  
Address: 1432 LANTRY COURT  
City-St-Zip: ORLANDO, FL 32804 US

Title: PD ( ) Delete  
Name: GALLAGHER, COLLEEN  
Address: 3500 W. COLONIAL DR  
City-St-Zip: ORLANDO, FL 32808 US

Title: SD ( ) Delete  
Name: BURNS, TERESA  
Address: 12001 SCIENCE DRIVE, SUITE 145  
City-St-Zip: ORLANDO, FL 32826 US

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: CD (X) Change ( ) Addition  
Name: REGULES, PETE  
Address: 106 LONGHORN RD  
City-St-Zip: WINTER PARK, FL 32792 US

Title: VCD (X) Change ( ) Addition  
Name: HOLLERBACH, LINDA  
Address: 1013 S. MYRTLE AVENUE  
City-St-Zip: SANFORD, FL 32771 US

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

Title: TD (X) Change ( ) Addition  
Name: JARVIS, BARBARA  
Address: 2053 WOODY DR.  
City-St-Zip: WINDERMERE, FL 34786 US

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

Title: SD (X) Change ( ) Addition  
Name: FOWLER, KEVIN  
Address: 111 N. ORANGE AVENUE  
City-St-Zip: ORLANDO, FL 32802 US

I hereby certify that the information supplied with this filing does not qualify for the 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: PATRICIA E. FRANK

MD

04/06/2006

Electronic Signature of Signing Officer or Director

Date