2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 728559

FILED Apr 20, 2006 Secretary of State

Entity Name: COMMUNITY SERVICE CENTER OF CENTRAL FLORIDA, INC.

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

621 WILKES AVENUE 621 WILKS AVENUE ORLANDO, FL 32809 ORLANDO, FL 32809

Current Mailing Address: New Mailing Address:

621 WILKES AVENUE 621 WILKS AVENUE ORLANDO, FL 32809 ORLANDO, FL 32809

FEI Number: 59-1499489 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:

HEWITT, FRANCES 1634 WIND HARBOR ROAD ORLANDO, FL 32809 US

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:

Name:

Address:

City-St-Zip:

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VP () Delete Title: CH (X) Change () Addition Name: TEDDER, MELISSA Name: TEDDER, MELISSA

Address: 8431 LE MESA STREET Address: 8431 LE MESA STREET
City-St-Zip: ORLANDO, FL 32827 City-St-Zip: ORLANDO, FL 32827

Title: TR () Delete Title: S (X) Change () Addition Name: MAINGUTH, GREG Name: MAINGUTH, GREG

Address: 1201 MELISSA AVE Address: 1201 MELISSA AVE
City-St-Zip: ORLANDO, FL 32807 City-St-Zip: ORLANDO, FL 32807

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

 Name:
 HEWITT, FRANCES
 Name:
 MACDIARMID, MALCOLM

Address: 1634 WIND HARBOR RD. Address: 1723 GOLSIDE DRIVE
City-St-Zip: ORLANDO, FL 32809 City-St-Zip: WINTER PARK, FL 32792

Title: ED () Delete Title: CEO (X) Change () Addition

 Name:
 PATES, LEE
 Name:
 PATES, LEE

 Address:
 621 WILKS AVE
 Address:
 621 WILKS AVE

 City-St-Zip:
 ORLANDO, FL 32809
 City-St-Zip:
 ORLANDO, FL 32809

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

 TAFT, SARA
 Name:

 1932 SOUTH BLVD.
 Address:

 MAITLAND, FL 32751
 City-St-Zip:

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: LEE PATES CEO 04/20/2006