

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 741421

FILED
Mar 23, 2007
Secretary of State

Entity Name: HUMAN DEVELOPMENT CENTER, INC.

Current Principal Place of Business:

5904 N. ARMENIA AVE.
STE A
TAMPA, FL 33603 US

New Principal Place of Business:

Current Mailing Address:

5904 N. ARMENIA AVENUE
A
TAMPA, FL 33603 US

New Mailing Address:

FEI Number: 59-1825942

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BELL, JAMES
5904 N. ARMENIA AVENUE
TAMPA, FL 33603 US

Name and Address of New Registered Agent:

BELL, JAMES L EXE DIR
5904 N. ARMENIA AVENUE
TAMPA, FL 33603 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: JAMES L. BELL, EXECUTIVE DIRECTOR

03/23/2007

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: SLOAN, KELLY
Address: 9918 ALAVISTA DRIVE
City-St-Zip: GIBSONTOWN, FL 33534

Title: V () Delete
Name: PETSCHOW, ROBERT
Address: 1701 20TH AVENUE
City-St-Zip: ST. PETERSBURG, FL 33713

Title: TS () Delete
Name: O'STEEN, STEVE
Address: 1210 TUXFORD DRIVE
City-St-Zip: BRANDON, FL 33511

Title: TR () Delete
Name: DENOME, SAMUEL
Address: 3008 LAKE ELLEN DRIVE
City-St-Zip: TAMPA, FL 33618

Title: TR () Delete
Name: WATERS, JACK
Address: 708 W HILDA STREET
City-St-Zip: TAMPA, FL 33603

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: TR (X) Change () Addition
Name: SLOAN, KELLY
Address: 9918 ALAVISTA DRIVE
City-St-Zip: GIBSONTOWN, FL 33534

Title: P (X) Change () Addition
Name: PETSCHOW, ROBERT
Address: 1701 20TH AVENUE
City-St-Zip: ST. PETERSBURG, FL 33713

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

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

Title: V (X) Change () Addition
Name: WATERS, JACK
Address: 708 W HILDA STREET
City-St-Zip: TAMPA, FL 33603

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: STEVE O'STEEN, SECRETARY/TREASURER

TS

03/23/2007

Electronic Signature of Signing Officer or Director

Date