2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 744637

FILED Jan 13, 2007 Secretary of State

Entity Name: LUCANUS DEVELOPMENTAL CENTER, INC.

Current Principal Place of Business: New Principal Place of Business: 6411 TAFT ST HOLLYWOOD, FL 33024 **Current Mailing Address: New Mailing Address: 6411 TAFT ST** HOLLYWOOD, FL 33024 FEI Number: 59-1867575 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: THOMAS, BUCKLEY BUCKLEY, THOMAS 13250 SW 4TH CT. 5722 SW 88TH TER COOPER CITY, FL 33328 US G-310 PEMBROKE PINES, FL 33027 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: THOMAS BUCKLEY 01/13/2007 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition BUCKLEY, THOMAS J Name: Name: 6402 BROOK HOLLOW CT Address: Address: City-St-Zip: TAMPA, FL 34698 City-St-Zip: Title: SD () Delete Title: () Change () Addition BUCKLEY, CHRIS Name: Name: Address: 11110 SW 13TH STREET Address: City-St-Zip: PEMBROKE PINES, FL 33025 City-St-Zip: Title: () Delete Title: (X) Change () Addition BUCKLEY, TOM, Name: BUCKLEY, TOM, Name: Address: 13250 SW 4TH CT Address: 5722 SW 88TH TER City-St-Zip: PEMBROKE PINES, FL 33027 City-St-Zip: COOPER CITY, FL 33328 Title: Title: () Change () Addition () Delete Name: MOUTESERCHIO, RONALD Name: Address: 910 SW 69TH TERR. Address: City-St-Zip: PLANTATION, FL 33317 City-St-Zip: Title: () Delete Title: () Change () Addition HERSHMAN, SHELDON Name: Name: 13701 WILKS DR Address: Address: City-St-Zip: TAMPA, FL 33618 City-St-Zip: Title: () Delete Title: () Change () Addition BUCKLEY, MIKE Name: Name: Address: 3406 NAVIGATOR POINT Address: KNOXVILLE, TN 37922 City-St-Zip: 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: CHRIS BUCKLEY SD 01/13/2007