

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 747853

FILED
Feb 23, 2006
Secretary of State

Entity Name: THE FLORIDA CENTER FOR CHILD AND FAMILY DEVELOPMENT, INC.

Current Principal Place of Business:

4620 17TH ST
SARASOTA, FL 34235 US

New Principal Place of Business:

Current Mailing Address:

4620 17TH ST
SARASOTA, FL 34235 US

New Mailing Address:

FEI Number: 59-1947024 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

HOWARD, PETER
4620 17TH STREET
SARASOTA, FL 34235 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: TR () Delete
Name: LUCKETT, DOUGLAS
Address: 5731 BEE RIDGE RD
City-St-Zip: SARASOTA, FL 34233

Title: CH () Delete
Name: TAYLOR, GINA
Address: 630 NORTH RIVER RD.
City-St-Zip: VENICE, FL 34293

Title: VC () Delete
Name: MALKIN, CINDY
Address: 4089 ROBERT PT. RD
City-St-Zip: SARASOTA, FL 34242

Title: S () Delete
Name: STEELE, RITA B
Address: 1828 ROLAND STREET
City-St-Zip: SARASOTA, FL 34231

Title: CEO () Delete
Name: HOWARD, PETER D LCSW
Address: 4620 17TH STREET
City-St-Zip: SARASOTA, FL 34235

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: TR (X) Change () Addition
Name: ERB, CAL
Address: 3148A SOUTHGATE CIRCLE
City-St-Zip: SARASOTA, FL 34239

Title: VC (X) Change () Addition
Name: DUNLAP, MELISSA
Address: 1381 HARBOR DRIVE
City-St-Zip: SARASOTA, FL 34239

Title: CH (X) Change () Addition
Name: MALKIN, CINDY
Address: 4089 ROBERT PT. RD
City-St-Zip: SARASOTA, FL 34242

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

Title: () Change () Addition
Name:
Address:
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: PETER D HOWARD

CEO

02/23/2006

Electronic Signature of Signing Officer or Director

Date