

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 749641

FILED
May 07, 2007
Secretary of State

Entity Name: THE FLORIDA PARENT-CHILD CENTER, INC.

Current Principal Place of Business:

2330-9TH ST.,S.
P.O.BOX 10576
ST PETERSBURG, FL 33733

New Principal Place of Business:

2330-9TH ST.,S.
ST PETERSBURG, FL 33705

Current Mailing Address:

2330-9TH ST.,S.
P.O.BOX 10576
ST PETERSBURG, FL 33733

New Mailing Address:

FEI Number: 59-2148803 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

NERO, CARRIE W.
5206 CAESAR WAY, S.
ST PETERSBURG FL, FL 33712 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: VTD () Delete
Name: SCOTT, BETTYE B.,
Address: 3800 40 WAY S.
City-St-Zip: ST PETERSBURG, FL 00000,

Title: PD () Delete
Name: NERO, CARRIE W,
Address: 5206 CAESAR WAY S
City-St-Zip: ST PETERSBURG, FL 00000,

Title: SD () Delete
Name: BOYD, SARA,
Address: 4422 POMPAÑO DR.
City-St-Zip: TAMPA, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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 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: CARRIE NERO

PD

05/07/2007

Electronic Signature of Signing Officer or Director

Date