2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 26, 2007
Secretary of State

DOCUMENT# 752422

Entity Name: COMMUNITY ALTERNATIVE SERVICES FOUNDATION, INC.

Current Principal Place of Business:

1300 NW 6TH STREET
GAINESVILLE, FL 326019222

New Principal Place of Business:

Current Mailing Address:

1300 NW 6TH STREET
GAINESVILLE, FL 326019222

New Mailing Address:

FEI Number: 59-2119072 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

PEARCE, JAMES F
1300 NW 6TH ST
GAINESVILLE, FL 32601 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: VPBD ( ) Delete
Name: MITZI, AUSTIN
Address: PO BOX 23109
City-St-Zip: GAINESVILLE, FL 32602

Title: SBD ( ) Delete
Name: CRAPPS, DANIEL
Address: 2806 W US HIGHWAY 90, SUITE 101
City-St-Zip: LAKE CITY, FL 32055

Title: M ( ) Delete
Name: PEARCE, JAMES F
Address: 1300 NW 6TH STREET
City-St-Zip: GAINESVILLE, FL 32601

Title: PBD ( ) Delete
Name: LANE, H. THOMAS JR
Address: 14 NE 1ST STREET
City-St-Zip: GAINESVILLE, FL 32601

Title: TBD ( ) Delete
Name: JOHNSON, RANDY S
Address: 116 NW 116TH AVE
City-St-Zip: GAINESVILLE, FL 32601

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:

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: JIM PEARCE CEO 04/26/2007
Electronic Signature of Signing Officer or Director — Date