

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 752945

FILED
Apr 30, 2007
Secretary of State

Entity Name: THE REGENERATION CENTER, INC.

Current Principal Place of Business:

2017 BROWARD AVE.
WEST PALM BEACH, FL 33407 US

New Principal Place of Business:

Current Mailing Address:

P.O BOX 1588
WEST PALM BEACH, FL 33402 US

New Mailing Address:

FEI Number: 59-2009267

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

FELDER, ROBERT
2831 AVENUE S
RIVIERA BEACH, FL 33404 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: T () Delete
Name: STINNETT, LINDA
Address: 108 PARADISE HARBOUR BLVD. #303
City-St-Zip: NORTH PALM BEACH, FL 33408

Title: VP () Delete
Name: FELDER, ROBERT
Address: 2831 AVENUE S
City-St-Zip: RIVIERA BEACH, FL 33404

Title: D () Delete
Name: MILES, DARRELL PASTOR
Address: 2950 SEACREAST BLVD.
City-St-Zip: BOYNTON BEACH, FL 33435

Title: S (X) Delete
Name: LOMBARDI, CONNIE
Address: 35 GRAND BAY CIRCLE
City-St-Zip: JUNO BEACH, FL 33408

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: T/S (X) Change () Addition
Name: STINNETT, LINDA
Address: 108 PARADISE HARBOUR BLVD. #303
City-St-Zip: NORTH PALM BEACH, FL 33408

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

Title: D (X) Change () Addition
Name: JENKINS, EMMANUEL PASTOR
Address: 2549 WESTCHESTER DRIVE
City-St-Zip: WEST PALM BEACH, FL 33407

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: LINDA STINNETT, TREASURER/SECRETARY

T/S

04/30/2007

Electronic Signature of Signing Officer or Director

Date