

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 765504

FILED  
Feb 21, 2006  
Secretary of State

**Entity Name:** TAUNTON'S FAMILY CHILDRENS HOME INC.

**Current Principal Place of Business:**

TAUNTON FAMILY ROAD  
PO BOX 870  
WEWAHITCHKA, FL 32465

**New Principal Place of Business:**

**Current Mailing Address:**

TAUNTON FAMILY ROAD  
PO BOX 870  
WEWAHITCHKA, FL 32465

**New Mailing Address:**

**FEI Number:** 59-2335556

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

TAUNTON, DAVID L.  
P.O. BOX 870, ROBERTS CEMETARY ROAD  
WEWAHITCHKA, FL 32465 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: D ( ) Delete  
Name: COSTIN, CHARLES  
Address: 413 WILLIAMS AVE  
City-St-Zip: PORT SAINT JOE, FL 32456

Title: D ( ) Delete  
Name: HARTZOG, JIM & MARY  
Address: 465 BAXTER ROAD  
City-St-Zip: ASHFORD, AL 36312

Title: D ( ) Delete  
Name: WHITEHEAD, CHARLES  
Address: P.O. BOX 16689  
City-St-Zip: PANAMA CITY, FL 32402

Title: D ( ) Delete  
Name: WISE, GUS & NANCY  
Address: 4209 LEISURE LAKES DR  
City-St-Zip: CHIPLEY, FL 32428

Title: D ( ) Delete  
Name: WATKINS, STEVE  
Address: 544 MOSS VIEW WAY  
City-St-Zip: TALLAHASSEE, FL 32312

Title: D ( ) Delete  
Name: WATSON, JIMMY  
Address: 4010 DEER PT LAKE DR  
City-St-Zip: PANAMA CITY, FL 32409

**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:

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: ABIGAIL J TAUNTON

SEC

02/21/2006

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date