

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F02000002385

FILED
May 02, 2010
Secretary of State

Entity Name: EDMUNDS PROGRAMS FOR HUMAN SERVICES, INCORPORATED

Current Principal Place of Business:

3138 CAMELOT DR.
HAINES CITY, FL 33844

New Principal Place of Business:

Current Mailing Address:

1631 ROCKSPRINGS RD
SUITE 120
APOPKA, FL 32712

New Mailing Address:

FEI Number: 38-2947606 **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:

Name and Address of New Registered Agent:

EDMUNDS, JAMILA DR.
3138 CAMELOT DR.
HAINES CITY, FL 33844 US

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: C
Name: MORROW, JENNIFER
Address: 1025 MORNING STAR DR.
City-St-Zip: LAKELAND, FL 33810

Title: SEC.
Name: EDMUNDS, THOMAS J 11
Address: 1631 ROCK SPRINGS RD #120
City-St-Zip: APOPKA, FL 32712

Title: CEO
Name: EDMUNDS, JAMILA DR.
Address: 1631 ROCK SPRINGS RD #120
City-St-Zip: APOPKA, FL 32712

I hereby 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 all other like empowered.

SIGNATURE: DR JAMILA EDMUNDS

CEO

05/02/2010

Electronic Signature of Signing Officer or Director

Date