

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

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FILED
Apr 05, 2011
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:

2598 ROOSEVELT RD
HAINES CITY, FL 33844

Current Mailing Address:

1631 ROCKSPRINGS RD
SUITE 120
APOPKA, FL 32712

New Mailing Address:

2598 ROOSEVELT RD
HAINES CITY, FL 33844

FEI Number: 38-2947606

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

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

Name and Address of New Registered Agent:

EDMUNDS, JAMILA DR.
2598 ROOSEVELT RD
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

04/05/2011

Date

OFFICERS AND DIRECTORS:

Title: C
Name: PARRIS, LATOYA C
Address: 4821 HATTERAS DR
City-St-Zip: CLERMONT, FL 34714

Title: SEC.
Name: EDMUNDS, THOMAS J 11
Address: 2598 ROOSEVELT RD
City-St-Zip: HAINES CITY, FL 33844

Title: CEO
Name: EDMUNDS, JAMILA DR.
Address: 2598 ROOSEVELT RD
City-St-Zip: HAINES CITY, FL 33844

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

04/05/2011

Electronic Signature of Signing Officer or Director

Date