2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F03000001046

FILED Mar 20, 2006 Secretary of State

Entity Name: ADOLESCENT AND CHILD TARGETS FOR HEALTH FOUNDATION, INC.

Current Principal Place of Business: New Principal Place of Business: 601 FOURTH ST. SOUTH, CRI 1008 ST. PETERSBURG, FL 33701 **Current Mailing Address: New Mailing Address:** 601 FOURTH ST. SOUTH, CRI 1008 ST. PETERSBURG, FL 33701 FEI Number: 34-1968245 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: (X) Change () Addition () Delete PLATT, LARRY J M.D. PLATT, LARRY J M.D. Name: Name: 565 BELLEVUE AVE. Address: 565 BELLEVUE AVE. Address: City-St-Zip: OAKLAND, CA 94610 City-St-Zip: OAKLAND, CA 94610 Title: () Delete Title: (X) Change () Addition SIMPSON, LISA A M.D. Name: SIMPSON, LISA A M.D. Name: Address: 601 4TH ST. SOUTH, CRI 1008 Address: 601 4TH ST. SOUTH, CRI 1008 City-St-Zip: ST. PETERSBURG, FL 33701 City-St-Zip: ST. PETERSBURG, FL 33701 Title: DV () Delete Title: DST (X) Change () Addition KELLER, DENNIS F JD KELLER, DENNIS F JD Name: Name: 842 W. SOUTH BOUNDARY Address: Address: 842 W. SOUTH BOUNDARY City-St-Zip: PERRYSBURG, OH 43551 City-St-Zip: PERRYSBURG, OH 43551 Title: DST () Delete Title: D (X) Change () Addition Name: BELL, ROBIN H Name: BELL, ROBIN H Address: 1018 EGRET CT. Address: 1018 EGRET CT. City-St-Zip: WESTERVILLE, OH 43082 City-St-Zip: WESTERVILLE, OH 43082 Title: () Delete Title: () Change () Addition FRANCE, LANE M.D. Name: Name: 11274 W. HILLSBOROUGH AVENUE Address: Address: City-St-Zip: TAMPA, FL 33635 City-St-Zip: Title: () Delete Title: () Change () Addition WITTENBERG, RICHARD L Name: Name: Address: 4321 COLUMBUS WAY SOUTH Address: ST. PETERSBURG, FL 33712 City-St-Zip: 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: RICHARD. L WITTENBERG PRES 03/20/2006