2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 07, 2005
Secretary of State

DOCUMENT# N00000003723

Entity Name: FAMILY SERVICE CENTERS, INC.

Current Principal Place of Business:

2960 ROOSEVELT BLVD
CLEARWATER, FL 33760

New Principal Place of Business:

Current Mailing Address:

2960 ROOSEVELT BLVD
CLEARWATER, FL 33760

New Mailing Address:

FEI Number: 59-3651126 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MONAHAN, MARY JO
2960 ROOSEVELT BLVD
CLEARWATER, FL 33760 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:	P/D	( ) Delete
Name:	KING, MALCOLM C	
Address:	662 SEVENTH AVENUE NORTH	
City-St-Zip:	TIERRA VERDE, FL 33715	
Title:	V/D	( ) Delete
Name:	NEWSOME, LARRY J	
Address:	6538 FIRST AVENUE NORTH	
City-St-Zip:	ST. PETERSBURG, FL 33718	
Title:	D	( ) Delete
Name:	HAYWARD, BETTY	
Address:	5234 DR. M.L. KING ST S	
City-St-Zip:	ST PETERSBURG, FL 33705	
Title:	S/D	( ) Delete
Name:	ALBANESE, MARCIA	
Address:	323 JEFFORDS MS #14	
City-St-Zip:	CLEARWATER, FL 33757	
Title:	D	( ) Delete
Name:	LERNER, LINDA S	
Address:	8022 OAK FOREST BLVD W	
City-St-Zip:	SEMNIOLE, FL 33776	
Title:	T/D	( ) Delete
Name:	HUMPHREYS, SUSAN H	
Address:	1822 DREW STREET #5	
City-St-Zip:	CLEARWATER, FL 33765	

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:	T/D	(X) Change ( ) Addition
Name:	TUFT, JON E	
Address:	740 CAPTIVA COURT NE	
City-St-Zip:	ST. PETERSBURG, FL 33702	

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: MALCOLM C. KING P/D 03/07/2005

Electronic Signature of Signing Officer or Director — Date