

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000006058

FILED
Jan 07, 2005
Secretary of State

Entity Name: FIRST COAST MANAGEMENT SERVICES, INC.

Current Principal Place of Business:

301 JUSTICE LANE
BUNNELL, FL 32110

New Principal Place of Business:

Current Mailing Address:

3875 TIGER BAY ROAD
DAYTONA BEACH, FL 32124 US

New Mailing Address:

FEI Number: 59-3750072

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

HOOD, DAVID
444 SEABREEZE
SUITE 900
DAYTONA BEACH, FL 32118 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: DR. () Delete
Name: MYRA, MIDDLETON
Address: 27 MONTAUK LANE
City-St-Zip: PALM COAST, FL 32164

Title: MR. () Delete
Name: SERBOUSK, TED CHAIR
Address: PO BOX 751
City-St-Zip: DAYTONA BEACH, FL 32115

Title: DR. () Delete
Name: KENNEDY, YVONNE PH D.
Address: PO BOX 1020
City-St-Zip: FERNANDINA BEACH, FL 32035

Title: DR. () Delete
Name: CANTLEY, ERNEST D MSW/DPA
Address: 138 WYNNFIELD DRIVE
City-St-Zip: PALM COAST, FL 32164

Title: MR. () Delete
Name: DIAZ, PHILLIP MSW
Address: 1132 RIO ST JOHNS DRIVE
City-St-Zip: JACKSONVILLE, FL 32211

Title: DR. () Delete
Name: GOLD, MARK MD
Address: 100 NEWELL ROAD - ROOM L4100
City-St-Zip: GAINESVILLE, FL 32610

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 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: PHIL DIAZ

MR.

01/07/2005

Electronic Signature of Signing Officer or Director

Date