

**2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED  
Jan 08, 2008  
Secretary of State**

DOCUMENT# N01000000155

Entity Name: FLORIDA HOME STUDIES AND ADOPTION, INC.

**Current Principal Place of Business:**

5930 PALMER BLVD  
SARASOTA, FL 34232

**New Principal Place of Business:**

**Current Mailing Address:**

5930 PALMER BLVD.  
SARASOTA, FL 34232

**New Mailing Address:**

FEI Number: 65-1107257      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

H. GREG LEE  
2014 FOURTH STREET  
SARASOTA, FL 34237      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: PD      ( ) Delete  
Name: H. GREG LEE,  
Address: 2014 FOURTH STREET  
City-St-Zip: SARASOTA, FL 34237

Title: VD      ( ) Delete  
Name: WHITESIDE, EMERSON G  
Address: 7131 SADDLE CREEK CIRCLE  
City-St-Zip: SARASOTA, FL 34241

Title: STD      ( ) Delete  
Name: MIGNEMI, DEBORAH V  
Address: 247 MCDILL AVENUE  
City-St-Zip: PORT CHARLOTTE, FL 33953

Title: VD      ( ) Delete  
Name: LEE, JUDITH A  
Address: 7007 WEBBER ROAD  
City-St-Zip: SARASOTA, FL 34240

**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:

I hereby certify that the information supplied with this filing does not qualify 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: DEBORAH V. MIGNEMI

STD

01/08/2008

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date