

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000001623

FILED
Feb 13, 2006
Secretary of State

Entity Name: THE OLIVE BRANCH, INC.

Current Principal Place of Business:

745 WOODS AVENUE
ORLANDO, FL 32805

New Principal Place of Business:

Current Mailing Address:

745 WOODS AVENUE
ORLANDO, FL 32805

New Mailing Address:

FEI Number: 59-3708878

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WAUGH, UYLEE R
381 IOWA WOODS CIRCLE, WEST
ORLANDO, FL 32824 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: D () Delete
Name: WAUGH, ULYEE R REV
Address: 381 IOWA WOODS CIRCLE WET
City-St-Zip: ORLANDO, FL 32824

Title: D () Delete
Name: ANDERSON, TYREE
Address: 5758 KINGSGATE DR.
City-St-Zip: ORLANDO, FL 32839

Title: D () Delete
Name: MILTON, SHAKARA L
Address: 11 S. PARRAMORE AVE.
City-St-Zip: ORLANDO, FL 32805

Title: MGRM () Delete
Name: MATTHEWS-PRYOR, ROSA
Address: 1633 MESSINA AVENUE
City-St-Zip: ORLANDO, FL 32839

Title: D () Delete
Name: WOODS, RICHARD C
Address: 5524 ARNOLD PALMER DRIVE APT. 1112
City-St-Zip: ORLANDO, FL 32811

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:

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: AVIS MCWHITE ANDERSON

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02/13/2006

Electronic Signature of Signing Officer or Director

Date