2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000003262

FILED Jun 23, 2005 Secretary of State

Entity Name: MS CENTERS OF FLORIDA FOUNDATION, INC.

Current Principal Place of Business: New Principal Place of Business: 1655 27TH STREET 1790 14TH AVENUE SUITE 1 VERO BEACH, FL 32960 VERO BEACH, FL 32960 **New Mailing Address: Current Mailing Address:** 1655 27TH STREET 1790 14TH AVENUE SUITE 1 VERO BEACH, FL 32960 VERO BEACH, FL 32960 FEI Number: 65-1103696 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Name and Address of Current Registered Agent: Name and Address of New Registered Agent: TIERNEY, THOMAS W STEVEN, LACHTERMAN 848 BRICKELL AVENUE 5070 N. HWY. A-1-A SUITE 200 SUITE 750 MIAMI, FL 33131 US VERO BEACH, FL 32963 US 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: STEVEN LACHTERMAN 06/23/2005 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete (X) Change () Addition TIERNEY, THOMAS W STEVEN, LACHTER Name: Name: 5070 HWY. AIA Address: 848 BRICKELL AVENUE Address: City-St-Zip: VERO BEACH, FL 32963 City-St-Zip: MIAMI, FL 33131 Title: Title: () Delete () Change () Addition HORSTMYER, JEFFERY L Name: Name: Address: 3661 S. MIAMI AVE. #209 Address: City-St-Zip: MIAMI, FL 33133 City-St-Zip: Title: () Delete Title: () Change () Addition STEIN, DANIEL Name: Name: Address: 1921 WALDEMERE ST. #701 Address: City-St-Zip: SARASOTA, FL 34239 City-St-Zip: Title: () Delete Title: (X) Change () Addition Name: SHATER, JAMES S Name: SHAFER, JAMES S Address: 1260 37TH ST. Address: 1260 37TH ST. City-St-Zip: VERO BEACH, FL 32960 City-St-Zip: VERO BEACH, FL 32960 Title: () Delete Title: () Change (X) Addition SHAFER, HELEN Name: Name: 1155 35TH LANE, SUITE 1 Address: Address: City-St-Zip: City-St-Zip: VERO BEACH, FL 32960 Title: () Delete Title: () Change (X) Addition CHRISTIN, PAGLEN Name: Name: Address: Address: 1790 14TH AVENUE VERO BEACH, FL 32960 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 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: CHRISTIN PAGLEN D 06/23/2005