2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 23, 2006
Secretary of State

DOCUMENT# N01000004990

Entity Name: UNITY FOR KIDS EARLY INTERVENTION CENTER, INC.

Current Principal Place of Business:

1063 NOTH HAVERHILL ROAD
WEST PALM BEACH, FL 33417

New Principal Place of Business:

Current Mailing Address:

11351 SUNSET BLVD.
ROYAL PALM BEACH, FL 33411

New Mailing Address:

FEI Number: 65-1122173 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

GREEN, SHARON
11351 SUNSET BLVD.
ROYAL PALM BEACH, FL 33411 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: GREEN, SHARON
Address: 11351 SUNSET BLVD.
City-St-Zip: ROYAL PALM BEACH, FL 33411

Title: V ( ) Delete
Name: SHERMAN, FRAN
Address: 164 BELLA VISTA WAY
City-St-Zip: ROYAL PALM BEACH, FL 33411

Title: T ( ) Delete
Name: LIQUORI, ANGELO
Address: 13836 SHEFFIELD ST.
City-St-Zip: WELLINGTON, FL 33414

Title: P ( ) Delete
Name: GORDON, ERIC
Address: 2158 POLO GARDENS DR., #208
City-St-Zip: WELLINGTON, FL 33414

Title: S ( ) Delete
Name: STONE, JEAN
Address: 13048 41ST LANE NORTH
City-St-Zip: ROYAL PALM BEACH, FL 33411

Title: TR ( ) Delete
Name: GROSSMAN, LILIANE
Address: 139 DOVE CIR.
City-St-Zip: ROYAL PALM BEACH, FL 33411

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: TR (X) Change ( ) Addition
Name: BLOOM, BOB
Address: 13581 COLUMBINE AVE.
City-St-Zip: WELLINGTON, FL 33414

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: P (X) Change ( ) Addition
Name: GORDON, ERIC
Address: 900 CRESTWOOD COURT S. #901
City-St-Zip: ROYAL PALM BEACH, FL 33411

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: SHARON M. GREEN D 04/23/2006

Electronic Signature of Signing Officer or Director — Date