

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000006430

FILED
Jun 28, 2005
Secretary of State

Entity Name: SANCTUARY HOUSE OF THE PALM BEACHES, INC.

Current Principal Place of Business:

1203 RIVERSIDE DRIVE
LAKE WORTH, FL 33463

New Principal Place of Business:

Current Mailing Address:

1203 RIVERSIDE DRIVE
LAKE WORTH, FL 33463

New Mailing Address:

FEI Number: 65-1137678 **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:

BRYANT, DONNA F
1203 RIVERSIDE DRIVE
LAKE WORTH, FL 33463 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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DCEO () Delete
Name: BRYANT, DONNA F
Address: 1203 RIVERSIDE DRIVE
City-St-Zip: LAKE WORTH, FL 33463

Title: D () Delete
Name: JOHNSON, RICKY
Address: 1203 RIVERSIDE DR.
City-St-Zip: LAKE WORTH, FL 33463

Title: D () Delete
Name: JOHNSON, JONATHAN
Address: 464 SCOTTSDALE CIRCLE
City-St-Zip: LEXINGTON, KY 40511

Title: D () Delete
Name: DAVIS, JERRY
Address: 3234 CHRISTIAN SPRINGS
City-St-Zip: LITHONIA, GA 30038

Title: D () Delete
Name: DRAPER, RHONDA
Address: 23402 MCCONN RD.
City-St-Zip: WARRENSVILLE HTS, OH 44128

Title: D (X) Delete
Name: DAVIS, PASTOR PIPER
Address: 3234 CHRISTIAN SPRINGS
City-St-Zip: LITHONIA, GA 30038

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: D (X) Change () Addition
Name: JOHNSON, JONATHAN
Address: 726 HOWARD ST.
City-St-Zip: LEXINGTON, KY 40508

Title: D (X) Change () Addition
Name: TUCKER, TIFPHANIE
Address: 516 NW 4TH AVENUE
City-St-Zip: HALLANDALE BEACH, FL

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: DONNA BRYANT

DCEO

06/28/2005

Electronic Signature of Signing Officer or Director

Date