

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000007314

FILED  
Sep 06, 2006  
Secretary of State

**Entity Name:** GADSDEN COUNTY R.E.E.A.C.H. INC.

**Current Principal Place of Business:**

508 N MADISON STREET  
QUINCY, FL 32351

**New Principal Place of Business:**

333 CIRCLE DRIVE  
QUINCY, FL 32351

**Current Mailing Address:**

508 N MADISON STREET  
QUINCY, FL 32351

**New Mailing Address:**

333 CIRCLE DRIVE  
QUINCY, FL 32351

**FEI Number:** 03-0378721      **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:**

GEE, NANCY  
508 N MADISON STREET  
QUINCY, FL 32351    US

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

GEE, NANCY  
333 CIRCLE DRIVE  
QUINCY, FL 32351    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: \_\_\_\_\_

09/06/2006

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: D                      ( ) Delete  
Name: GEE, NANCY  
Address: 508 N MADISON ST  
City-St-Zip: QUINCY, FL 32351

Title: D                      ( ) Delete  
Name: BURGESS, ANGELA  
Address: 23911 BLUE STAR MEM. HWY  
City-St-Zip: QUINCY, FL 32351

Title: D                      ( ) Delete  
Name: FINCH, SOKOYA  
Address: 400 GAITHER DRIVE  
City-St-Zip: TALLAHASSEE, FL 32305

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: D                      (X) Change ( ) Addition  
Name: GEE, NANCY  
Address: 333 CIRCLE DRIVE  
City-St-Zip: QUINCY, FL 32351

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: NANCY GEE

DIRE

09/06/2006

Electronic Signature of Signing Officer or Director

Date