

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000002213

FILED  
Jun 21, 2006  
Secretary of State

**Entity Name:** PARTNERSHIP FOR STRONG FAMILIES, INC.

**Current Principal Place of Business:**

315 SE 2ND AVE  
GAINESVILLE, FL 32601

**New Principal Place of Business:**

515 N MAIN STREET  
GAINESVILLE, FL 32601

**Current Mailing Address:**

315 SE 2ND AVE  
GAINESVILLE, FL 32601

**New Mailing Address:**

515 N. MAIN STREET  
GAINESVILLE, FL 32601

**FEI Number:** 03-0423150      **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:**

MURPHY, STEVEN J  
315 SE 2ND AVE  
GAINESVILLE, FL 32601      US

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

MURPHY, STEVEN J  
515 N. MAIN STREET  
GAINESVILLE, FL 32601      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:

06/21/2006

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: C      ( ) Delete  
Name: DEMARK, DIANE  
Address: 1485 SOUTH SEMORAN BLVD. #1448  
City-St-Zip: WINTER PARK, FL 32792

Title: D      ( ) Delete  
Name: PRISCO, JOANN  
Address: 311 S SECOND ST  
City-St-Zip: FORT PIERCE, FL 34950

Title: D      ( ) Delete  
Name: KATZ, SHELLY  
Address: 605 NE 1ST STREET  
City-St-Zip: GAINESVILLE, FL 32601

Title: D      ( ) Delete  
Name: BOCCABELLA, LOU  
Address: 311 SOUTH SECOND ST  
City-St-Zip: FORT PIERCE, FL 34950

Title: ST      ( ) Delete  
Name: LABARTA, MARGARITA  
Address: 4310 SW 13TH ST  
City-St-Zip: GAINESVILLE, FL 32608

Title: D      ( ) Delete  
Name: WINTERS, JAMES  
Address: 4310 SW 13TH ST  
City-St-Zip: GAINESVILLE, FL 32608

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

Title: C      (X) Change ( ) Addition  
Name: HUGHEY, JAN  
Address: 3802 SW 93RD TERRACE  
City-St-Zip: GAINESVILLE, FL 32608

Title: VC      (X) Change ( ) Addition  
Name: STRINGFELLOW, JIM  
Address: 6910 W UNIVERSITY AVE, SUITE 1  
City-St-Zip: GAINESVILLE, FL 32607

Title: ST      (X) Change ( ) Addition  
Name: CHILDS, GINGER  
Address: 3916 SW 69TH AVENUE  
City-St-Zip: GAINESVILLE, FL 32608

Title: DR      (X) Change ( ) Addition  
Name: BOWIE, MICHAEL  
Address: G415 NORMAN HALL  
City-St-Zip: GAINESVILLE, FL 32611 70

Title: DR      (X) Change ( ) Addition  
Name: HOVEY, MARY-ANNA  
Address: 3131 NW 9TH PLACE  
City-St-Zip: GAINESVILLE, FL 32605

Title: BM      (X) Change ( ) Addition  
Name: HALEY, JO  
Address: PO BOX 1385  
City-St-Zip: LAKE CITY, FL 32056

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: STEVEN J. MURPHY

PRES

06/21/2006

Electronic Signature of Signing Officer or Director

Date