## 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N02000004033

FILED Apr 19, 2006 Secretary of State

Entity Name: FRIENDS OF HEALTH & HUMAN SERVICES OF ST. JOHNS COUNTY, FLORIDA, INC.

Current Principal Place of Business: New Principal Place of Business:

1955 S US 1 STE C-2 4475 US 1 SOUTH

ST AUGUSTINE, FL 32086 STE 103

ST AUGUSTINE, FL 32086

Current Mailing Address: New Mailing Address:

1955 S US 1 STE C-2 4475 US 1 SOUTH

ST AUGUSTINE, FL 32086 STE 103

ST AUGUSTINE, FL 32086

FEI Number: 03-0444454 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

SAWHILL, SANDY CRAWFORD, JOHN R 1955 UNITED STATES HIGHWAY ONE SOUTH 4475 US 1 SOUTH

1955 UNITED STATES HIGHWAY ONE SOUTH 4475 US 1 SOUTH SUITE B6 STE 103

SAINT AUGUSTINE, FL 32086 US SAINT AUGUSTINE, FL 32086 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: JOHN R CRAWFORD 04/19/2006

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

itle: S () Delete Title: S (X) Change () Addition

 Name:
 DEVILLE, VALERIE
 Name:
 BUSH, MARTHA

 Address:
 1955 US 1 SOUTH, STE. C-2
 Address:
 4475 US 1 SOUTH STE 103

 City-St-Zip:
 SAINT AUGUSTINE, FL 32086
 City-St-Zip:
 SAINT AUGUSTINE, FL 32086

Title: P ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 MERCADO, ANTONIO
 Name:

 Address:
 977 WHITE EAGLE CIRCLE
 Address:

 City-St-Zip:
 SAINT AUGUSTINE, FL 32086
 City-St-Zip:

 $\label{eq:title:V} {\sf Title:} \qquad {\sf V} \qquad {\sf () Delete} \qquad \qquad {\sf Title:} \qquad {\sf V} \qquad {\sf (X) Change () Addition}$ 

 Name:
 GOYINGS, BETTY
 Name:
 FREEMAN, CHERYL

 Address:
 55 RIBERIA STREET SUITE 1
 Address:
 4475 US 1 SOUTH STE 103

 City-St-Zip:
 SAINT AUGUSTINE, FL 32084
 City-St-Zip:
 SAINT AUGUSTINE, FL 32086

Name:SAWHILL, SANDYName:CRAWFORD, JOHN RAddress:1955 US ONE SOUTH SUITE B6Address:4475 US 1 SOUTH STE 103City-St-Zip:SAINT AUGUSTINE, FL 32086City-St-Zip:SAINT AUGUSTINE, FL 32086

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: ANTONIO MERCADO P 04/19/2006