

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000006348

FILED  
Apr 13, 2010  
Secretary of State

**Entity Name:** L.C. CALLAHAN ENRICHMENT CENTER, CORP

**Current Principal Place of Business:**

12637 BISCAYNE LAKE DR  
JACKSONVILLE, FL 32218

**New Principal Place of Business:**

**Current Mailing Address:**

12637 BISCAYNE LAKE DR  
JACKSONVILLE, FL 32218

**New Mailing Address:**

**FEI Number:** 56-2289425

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

CALLAHAN, DELORES  
12637 BISCAYNE LAKE DRIVE  
JACKSONVILLE, FL 32218 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: P  
Name: CALLAHAN, DELORES  
Address: P.O. BOX 26215  
City-St-Zip: JACKSONVILLE, FL 32218 US

Title: VP  
Name: CALLAHAN, CARLOS  
Address: P.O. BOX 26215  
City-St-Zip: JACKSONVILLE, FL 32218 US

Title: C  
Name: FIELDS, LOUIS  
Address: 10905 LYDIA ESTATES DR.  
City-St-Zip: JACKSONVILLE, FL 32218 US

Title: S  
Name: TOWNSEND, CHERYL  
Address: 3857 ANDERSON WOOD DR.  
City-St-Zip: JACKSONVILLE, FL 32218 US

Title: T  
Name: ALEXANDER, OLLIE  
Address: 5211 PORTSMOUTH AVE.  
City-St-Zip: JACKSONVILLE, FL 32208 US

I hereby 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 all other like empowered.

SIGNATURE: DELORES CALLAHAN

P

04/13/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date