2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 24, 2007
Secretary of State

DOCUMENT# N02000007311

Entity Name: FATHERHOOD ASSISTANCE, LIFESTYLE & LEGAL SERVICES, INC.

Current Principal Place of Business:

4202 WEST NASSAU STREET
TAMPA, FL 33607

New Principal Place of Business:

Current Mailing Address:

4202 WEST NASSAU STREET
TAMPA, FL 33607

New Mailing Address:

FEI Number: 02-0688397 **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:

COOPER, EDWARD A
3410 MCBERRY
TAMPA, FL 33601 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: D ( ) Delete
Name: GRAY, FRED D
Address: 4217 W. NASSAU ST.
City-St-Zip: TAMPA, FL 33607

Title: D ( ) Delete
Name: GRAY, JIMMIE L
Address: 1739 W. WALNUT
City-St-Zip: TAMPA, FL 33607

Title: D ( ) Delete
Name: COOPER, EDWARD
Address: 3410 MCBERRY
City-St-Zip: TAMPA, FL 33601

Title: D ( ) Delete
Name: CHARLES, WILLIAM
Address: 6903 CARSON AVE
City-St-Zip: TAMPA, FL 33614

Title: D ( ) Delete
Name: REESE, LINDA C REV.
Address: 1928 W. SPRUCE ST.
City-St-Zip: TAMPA, FL 336073010

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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 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: FRED GRAY D 07/24/2007

Electronic Signature of Signing Officer or Director Date