2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000004929

Entity Name: SAFE PASSAGE HOME, INC.

FILED Apr 18, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 610 FLORIDA BOULEVARD NEPTUNE BEACH, FL 32266 **Current Mailing Address: New Mailing Address:** 610 FLORIDA BOULEVARD NEPTUNE BEACH, FL 32266 FEI Number: 42-1596273 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: FRITSCH, DEBRA K 32 OAKWOOD ROAD JACKSONVILLE BEACH, FL 32250 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition MCCOY, JOSEPH S Name: Name: 216 EVANS DRIVE Address: Address: City-St-Zip: JACKSONVILLE BEACH, FL 32250 City-St-Zip: Title: () Delete Title: () Change () Addition MCMINN, ROBERT H Name: Name: Address: 1116 CEDAR STREET Address: City-St-Zip: NEPTUNE BEACH, FL 32266 City-St-Zip: Title: () Delete Title: () Change () Addition SHELTON, CHARLES Name: Name: Address: 2175 FOREST GATE DRIVE EAST Address: City-St-Zip: JACKSONVILLE, FL 32246 City-St-Zip: Title: () Delete Title: () Change () Addition Name: WILCOX, MICHAEL Name: 4610 MARSH HAWK PLACE Address: Address: City-St-Zip: PONTE VEDRA BEACH, FL 32082 City-St-Zip: Title: () Delete Title: () Change () Addition MCMANUS, RICHARD Name: Name: 7190 MARSH HAWK COURT Address: Address: City-St-Zip: PONTE VEDRA BEACH, FL 32082 City-St-Zip: Title: () Delete Title: (X) Change () Addition ROBBINS, BRUCE ROBBINS,, BRUCE Name: Name: Address: 1959 SELVA MARINA DRIVE Address: 1959 SELVA MARINA DRIVE ATLANTIC BEACH, FL 32233 ATLANTIC BEACH, FL 32233 City-St-Zip: 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: JOSEPH S MCCOY P 04/18/2006