## 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N03000006057

Entity Name: FAMILY CONNECTION CENTER, INC.

FILED May 07, 2004 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 3406 PALM BEACH BOULEVARD 3406 PALM BEACH BOULEVARD FORT MYERS, FL 33908 FORT MYERS, FL 33916 **Current Mailing Address: New Mailing Address:** 3406 PALM BEACH BOULEVARD 3406 PALM BEACH BOULEVARD FORT MYERS, FL 33908 FORT MYERS, FL 33916 FEI Number: 20-0082196 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: VARLEY, ELIZABETH G 15341 THORNTON ROAD FORT MYERS, FL 33908 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 ROSE, JUNE Name: Name: Address: 3406 PALM BEACH BOULEVARD Address: City-St-Zip: FORT MYERS, FL 33916 US City-St-Zip: Title: () Delete Title: () Change () Addition Name: CINTRON, IVETTE Name: Address: 307 LINCOLN AVENUE Address: City-St-Zip: LEHIGH ACRES, FL 33972 US City-St-Zip: Title: () Delete Title: () Change () Addition HEDGE, SUSAN L Name: Name: 1337 BARRETT ROAD Address: Address: City-St-Zip: FORT MYERS, FL 33903 US City-St-Zip: Title: () Delete Title: () Change () Addition Name: PETITO, CONSTANCE Name: Address: 1563-4 PARKMEADOWS DRIVE Address: City-St-Zip: FORT MYERS, FL 33907 US City-St-Zip: Title: () Delete Title: () Change () Addition YANKOVICH, DORIS Name: Name: 3406 PALM BEACH BOULEVARD Address: Address: City-St-Zip: FORT MYERS, FL 33916 City-St-Zip: Title: () Delete Title: ( ) Change (X) Addition COMER. PATRICK Name: Name: Address: Address: 2824 PALM BEACH BOULEVARD FORT MYERS, FL 33901 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 Section 119.07(3)(i), 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: JUNE ROSE C 05/07/2004

DR. SAKINAH SALAHU-DIN, DIRECTOR 10501 FGCU BOULEVARD SOUTH FORT MYERS, FLORIDA 33935

MARK GEISLER, DIRECTOR 2727 WINKLER AVENUE FORT MYERS, FLORIDA 33901