

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000006057

FILED
Jul 18, 2005
Secretary of State

Entity Name: FAMILY CONNECTION CENTER, INC.

Current Principal Place of Business:

3406 PALM BEACH BOULEVARD
FORT MYERS, FL 33916 US

New Principal Place of Business:

Current Mailing Address:

3406 PALM BEACH BOULEVARD
FORT MYERS, FL 33916 US

New Mailing Address:

FEI Number: 20-0082196 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:

VARLEY, ELIZABETH G
15341 THORNTON ROAD
FORT MYERS, FL 33908 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: C () Delete
Name: ROSE, JUNE
Address: 3406 PALM BEACH BOULEVARD
City-St-Zip: FORT MYERS, FL 33916 US

Title: D () Delete
Name: CINTRON, IVETTE
Address: 307 LINCOLN AVENUE
City-St-Zip: LEHIGH ACRES, FL 33972 US

Title: D () Delete
Name: HEDGE, SUSAN L
Address: 1337 BARRETT ROAD
City-St-Zip: FORT MYERS, FL 33903 US

Title: D () Delete
Name: PETITO, CONSTANCE
Address: 1563-4 PARKMEADOWS DRIVE
City-St-Zip: FORT MYERS, FL 33907 US

Title: D () Delete
Name: YANKOVICH, DORIS
Address: 3406 PALM BEACH BOULEVARD
City-St-Zip: FORT MYERS, FL 33916

Title: D () Delete
Name: COMER, PATRICK
Address: 2824 PALM BEACH BOULEVARD
City-St-Zip: FORT MYERS, FL 33901

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:

Title: () Change () Addition
Name:
Address:
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

D

07/18/2005

Electronic Signature of Signing Officer or Director

_____ Date