2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 25, 2005
Secretary of State

DOCUMENT# N03000006534

Entity Name: MILESTONE SOCIAL SERVICES, INC.

Current Principal Place of Business:

141 CONCORD DRIVE
SUITE 1205
CASSELBERRY, FL 32707

New Principal Place of Business:

315 N. LAKEMONT AVE.
STE. B
WINTER PARK, FL 32792

Current Mailing Address:

141 CONCORD DRIVE
SUITE 1205
CASSELBERRY, FL 32707

New Mailing Address:

8220 FIRENZE BLVD.
ORLANDO, FL 32836

FEI Number: 56-2381620 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SHAO, SAMUEL
3220 TALL TIMBER DR.
ORLANDO, FL 32812 US

Name and Address of New Registered Agent:

SHAO, SAMUEL
8220 FIRENZE BLVD.
ORLANDO, FL 32836 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: SAMUEL SHAO 04/25/2005
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: DUAN, DORIS
Address: 3220 TALL TIMBER DR.
City-St-Zip: ORLANDO, FL 32812

Title: VP ( ) Delete
Name: SHAO, SAMUEL
Address: 3220 TALL TIMBER DR.
City-St-Zip: ORLANDO, FL 32812

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: DUAN, DORIS
Address: 8220 FIRENZE BLVD.
City-St-Zip: ORLANDO, FL 32836

Title: VP (X) Change ( ) Addition
Name: SHAO, SAMUEL
Address: 8220 FIRENZE BLVD.
City-St-Zip: ORLANDO, FL 32836

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: SAMUEL SHAO P 04/25/2005
Electronic Signature of Signing Officer or Director Date