2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000007027

FILED Mar 23, 2006 Secretary of State

Entity Name: VICTIM SERVICES COALITION OF THE 7TH JUDICIAL CIRCUIT, INC.

Current Pi	rincipal Plac	ce of Business:	New Prince	New Principal Place of Business:		
P.O. BOX 2 BUNNELL,	2058 FL 32110	US				
Current Mailing Address:			New Maili	New Mailing Address:		
P.O. BOX 2 BUNNELL,	2058 FL 32110	US				
FEI Number:	56-2407324	FEI Number Applied For ()	FEI Number Not App	licable()	Certificate of Status Desired ()	
Name and	Address of	Current Registered Agent:	Name and	Address of	New Registered Agent:	
CHRISTEN P.O. BOX 2 BUNNELL,		US				
	named entity of Florida.	y submits this statement for the pu	rpose of changing i	ts registered	I office or registered agent, or both,	
SIGNATUF	RE:					
	Electro	onic Signature of Registered Agen	t		Date	
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	P (CHRISTEN, D P.O. BOX 200 BUNNELL, FL	58	Title: Name: Address: City-St-Zip:		()Change ()Addition	
Title: Name: Address: City-St-Zip:	WRIGHT, BAI P.O. BOX 142		Title: Name: Address: City-St-Zip:		()Change ()Addition	
Title: Name: Address: City-St-Zip:	CAREY, DIAN P.O. BOX 636		Title: Name: Address: City-St-Zip:	HAWES, DEI PO BOX 219		
Title: Name: Address: City-St-Zip:	D (PEPPIN, VICI 1001 JUSTIC BUNNELL, FL	E LANE	Title: Name: Address: City-St-Zip:	CASELLA, K 344 S. BEAC		
Title: Name: Address: City-St-Zip:	ROSSETTI, J 444 SEABRE		Title: Name: Address: City-St-Zip:		()Change ()Addition	
Title: Name: Address: City-St-Zip:	ROE, JONATI 128 - A ORAN		Title: Name: Address: City-St-Zip:		()Change ()Addition	

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: DIANA CHRISTEN PRES 03/23/2006