2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000008240

Entity Name: TBI RESIDENTIAL SERVICES, INC.

FILED Feb 05, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

2700 WEST 81ST STREET HIALEAH, FL 33016

Current Mailing Address: New Mailing Address:

2700 WEST 81ST STREET HIALEAH, FL 33016

FEI Number: 20-0277985 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

LUSTIG, ROY R ESQ. LUSTIG, ROY R ESQ. ONE SE THIRD AVE ONE SÉ THIRD AVE 1210 SUNTRUST INTERN'L CENTRE SUITE 1210 MIAMI, FL 33131 US MIAMI, FL 33131 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: 02/05/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

PCEO (X) Change () Addition () Delete SCHILLINGER, JACK ANIELLO, JOSEPH ED.D. Name: Name: 2700 WEST 81ST STREET Address: 1225 NE 93 STREET Address:

City-St-Zip: HIALEAH, FL 33016 City-St-Zip: MIAMI, FL 33138

Title: CD Title: **VCHA** (X) Change () Addition () Delete

LUSTIG, ROY Name: STEINHART, CRAIG Name: Address: 1 SE 3 AVE. 1210 SUNRUST INTERN'L CTR Address: 2501 NE 22 TERRACE City-St-Zip: MIAMI, FL 33131 City-St-Zip: FT, LAUDERDALE,, FL 33305

Title: VCD Title: MEMB (X) Change () Addition () Delete GENTRY, RAY BONCHICK, NORMAN Name: Name: Address: Address:

10743 ST. ANDREWS ROAD 264 LAURELWOOD SAUTE NACOCHE, GA 30571 City-St-Zip: City-St-Zip: BOYNTON BEACH, FL 33436

Title: () Delete Title: MEMB () Change (X) Addition

GENTRY, RAY Name: Name: 264 LAURELWOOD Address: Address:

City-St-Zip: City-St-Zip: SAUTE NACOCHE, GA 30571

Title: () Delete Title: MEMB () Change (X) Addition

SPIVAK, RUTH Name: Name:

7290 KINGHURST DRIVE, #310 Address: Address: City-St-Zip: City-St-Zip: DELRAY BEACH,, FL 33446

Title: () Delete Title: MEMB () Change (X) Addition

PARRETT, MARY Name: Name: Address: Address: 4450 8TH STREET SARASOTA,, FL 34232 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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 A. ANIELLO **PRES** 02/05/2009