

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000010742

FILED
Apr 03, 2006
Secretary of State

Entity Name: STUDENTS ASSOCIATION IN HUMAN VALUES, INC.

Current Principal Place of Business:

7933 BAYMEADOWS WAY
SUITE 9
JACKSONVILLE, FL 32256

New Principal Place of Business:

6817 SOUTHPOINT PARKWAY
SUITE 2303
JACKSONVILLE, FL 32216

Current Mailing Address:

7933 BAYMEADOWS WAY
SUITE 9
JACKSONVILLE, FL 32256

New Mailing Address:

6817 SOUTHPOINT PARKWAY
SUITE 2303
JACKSONVILLE, FL 32216

FEI Number: **FEI Number Applied For ()** **FEI Number Not Applicable (X)** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

GOMEZ, JOSE M
7933 BAYMEADOWS WAY
SUITE 9
JACKSONVILLE, FL 32256 US

Name and Address of New Registered Agent:

GOMEZ, JOSE M
6817 SOUTHPOINT PARKWAY
JACKSONVILLE, FL 32216 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: _____ 04/03/2006
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: GOMEZ, JOSE M M.D.
Address: 10150 BELLE RIVE BLVD. APT. 2806
City-St-Zip: JACKSONVILLE, FL 32256 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: GOMEZ, JOSE M M.D.
Address: 9836 TRENDLE LANE
City-St-Zip: JACKSONVILLE, FL 32257 US

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: JOSE M. GOMEZ, MD P 04/03/2006
Electronic Signature of Signing Officer or Director Date