

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000000907

FILED
Aug 30, 2006
Secretary of State

Entity Name: MEGAN'S CIRCLE OF HOPE, INC.

Current Principal Place of Business:

6204 INTERBAY BOULEVARD
TAMPA, FL 33611

New Principal Place of Business:

Current Mailing Address:

6204 INTERBAY BOULEVARD
TAMPA, FL 33611

New Mailing Address:

FEI Number: 20-0682357 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)
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:

HARRIS, ROBERT
6204 INTERBAY BOULEVARD
TAMPA, FL 33611 US

Name and Address of New Registered Agent:

HARRIS, ROBERT R
6204 INTERBAY BOULEVARD
TAMPA, FL 33611 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: ROBERT R. HARRIS

08/30/2006

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: COBURN, DENISE K
Address: 3804 NORTH B. STREET
City-St-Zip: TAMPA, FL 33609

Title: D () Delete
Name: HARRIS, ROBERT
Address: 6204 INTERBAY BOULEVARD
City-St-Zip: TAMPA, FL 33611

Title: D () Delete
Name: GLISSON, TIM
Address: 2424 PROSPECT ROAD
City-St-Zip: TAMPA, FL 33629

Title: D () Delete
Name: BRINDISE, SUSAN
Address: 6204 INTERBAY BOULEVARD
City-St-Zip: TAMPA, FL 33611

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: HARRIS, ROBERT R
Address: 1116 S. DUNBAR AVE.
City-St-Zip: TAMPA, FL 33629

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: GLISSON, SALLY
Address: 2424 PROSPECT ROAD
City-St-Zip: TAMPA, FL 33629

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: ROBERT R. HARRIS

D

08/30/2006

Electronic Signature of Signing Officer or Director

Date