

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000009010

FILED
Apr 29, 2006
Secretary of State

Entity Name: THE CENTER IN TAMPA, INC.

Current Principal Place of Business:

6821 W WATERS AVE
TAMPA, FL 33634

New Principal Place of Business:

911 BRYAN ROAD
BRANDON, FL 33511

Current Mailing Address:

P.O. BOX 672
BRANDON, FL 335090672

New Mailing Address:

FEI Number: 27-0104126

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ROMAN, ROBERT
6821 W WATERS AVE
TAMPA, FL 33634 US

Name and Address of New Registered Agent:

ROMAN, ROBERT
12010 COLONIAL ESTATES LANE
RIVERVIEW, FL 33569 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 ROMAN

04/29/2006

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PCT () Delete
Name: ROMAN, ROBERT
Address: 12010 COLONIAL ESTATES LN
City-St-Zip: RIVERVIEW, FL 33569

Title: VT () Delete
Name: ROMAN, ORFA
Address: 12010 COLONIAL ESTATES LN
City-St-Zip: RIVERVIEW, FL 33569

Title: S () Delete
Name: HARWOOD, TERESA
Address: 6821 W WATERS AVE
City-St-Zip: TAMPA, FL 33634

Title: T () Delete
Name: COBEAGA, MIRIAM
Address: 119 KIANA DR
City-St-Zip: BRANDON, FL 33511

Title: VT () Delete
Name: COTTO, SAMUEL
Address: 6821 W WATERS AVE
City-St-Zip: TAMPA, FL 33634

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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

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 ROMAN

P

04/29/2006

Electronic Signature of Signing Officer or Director

Date