## 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N0400009038

Entity Name: A BETTER CHANCE, INC

FILED Apr 26, 2006 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
Current Frincipal Flace Of Business.	New Fillicipal Flace Of Dusiliess.

6999-02 MERRILL RD STE 158 JACKSONVILLE, FL 32277

Current Mailing Address: New Mailing Address:

6999-02 MERRILL RD STE 158 JACKSONVILLE, FL 32277

FEI Number: 02-0730556 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

HUDSON, KENNETH T
11052 LYDIA ESTATES DR W
JACKSONVILLE, FL 32218 US
HUDSON, KENNETH T
6999-02 MERRILL RD STE 158
JACKSONVILLE, FL 32277 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: KENNETH HUDSON 04/26/2006

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

 Name:
 HUDSON, KENNETH T
 Name:
 HUDSON, KENNETH T

 Address:
 11052 LYDIA ESTATES DR W
 Address:
 6999-02 MERRILL RD STE-158

 City-St-Zip:
 JACKSONVILLE, FL 32218
 City-St-Zip:
 JACKSONVILLE, FL 32277

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

Name: BROWN, TERINA Name: BROWN, TERINA
Address: 7424 AMANDAS CROSSING Address: 6999-02 MERRILL

Address: 7424 AMANDAS CROSSING Address: 6999-02 MERRILL RD STE 158
City-St-Zip: JACKSONVILLE, FL 32244 City-St-Zip: JACKSONVILLE, FL 32277

Title: D ( ) Delete Title: ( ) Change ( ) Addition

Name:SCARBOROUGH, TAMMYName:Address:7226 W COLONIAL DR STE 360Address:City-St-Zip:ORLANDO, FL 32818City-St-Zip:

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

 Name:
 BROWN, ANGELA
 Name:

 Address:
 11052 LYDIA ESTATES DR W
 Address:

 City-St-Zip:
 JACKSONVILLE, FL 32218
 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: KENNETH HUDSON D 04/26/2006