2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000000414

Entity Name: COMMUNITY SERVICES FOR THE AGED, INC.

FILED Mar 14, 2006 Secretary of State

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

12121 LITTLE ROAD UNIT #236 7236 STATE ROAD 52 HUDSON, FL 34667

SUITE 11

BAYONET POINT, FL 34667

Current Mailing Address: New Mailing Address:

12121 LITTLE ROAD UNIT #236 7236 STATE ROAD 52

HUDSON, FL 34667 SUITE 11

BAYONET POINT, FL 34667

FEI Number: 20-2157787 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:

SPIEGEL & UTRERA, P.A. 1840 SW 22ND ST. 4TH FLOOR MIAMI, FL 33145 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:

Date

Electronic Signature of Registered Agent

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

OFFICERS AND DIRECTORS:

() Delete RIVERA-THERREL, JOANNE Name: 12121 LITTLE ROAD UNIT #236 Address:

City-St-Zip: HUDSON, FL 34667

Title: DST () Delete Name: THERRELL, MARK D

Address: 12121 LITTLE ROAD UNIT #236

City-St-Zip: HUDSON, FL 34667

Title: (X) Delete THERRELL, ROBERT W SR Name:

Address: 12121 LITTLE ROAD UNIT #236

City-St-Zip: HUDSON, FL 34667

(X) Change () Addition RIVERA-THERREL, JOANNE Name: Address: 7236 STATE ROAD 52, SUITE 11 City-St-Zip: BAYONET POINT, FL 34667

(X) Change () Addition Title: DST

Name: THERRELL, MARK D

Address: 7236 STATE ROAD 52, SUITE 11 City-St-Zip: BAYONET POINT, FL 34667

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: JOANNE RIVERA-THERRELL DP 03/14/2006