2006 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT**

FILED Apr 28, 2006 8:00 am Secretary of State

1. Entity Name LIFE SKILLS CENTER PINELLAS COUNTY, INC.								04-28-20	006 90197 (004 ****61	.25
Principal Place of Business 109 PHILLIPS WAY PALM HARBOR, FL 34683 Mailing Address 109 PHILLIPS WAY PALM HARBOR, FL 34683				683			6	00303	368		
4901 Central Ave.			Mailing Address 4901 Central Ave.								
Suite, Apt. #, etc.		Suit	Suite, Apt. #, etc.				04172006	Chg-NP	CR2E	E037 (11/ 05)	
City & State St. Pete	e rsburg, FL		City & State St. Petersburg, FL				4. FEI Numbe 20-30076			— — —	pplied For lot Applicable
Zip	Country Zip Cou		Cou	-	5. Certificate of Status Desired S8.75 Additional				Iditional		
33710	U.S.A.	337		U.S	.A.					Fee Requin	ed
	6. Name and Address of Current	Registered	Agent		Name		7. Name and	Address of I	lew Registere	d Agent	· · · · · · · · · · · · · · · · · · ·
CLARK, C	HRISTOPHER B		•		Susan Latvala						
1901 N 13 TAMPA, FI	TH STREET SUITE 300				Street Address (P.O. Box Number is Not Acceptable) 109 Phillips Way						
77 (1017 7)	2 00000										
					City Pa	alm Har	bor		F	L Zip Coo 3468	
	named entity submits this statement for ions of registered agent. Signature, typed or printed name of registeryd agent Susan Latvala, Board President	Hand title if applied	la		· · · · · · · · · · · · · · · · · · ·		ed agent, or both	n, in the State	9-76-	-06	, and accept
	Filing Fee is \$61.25 Due by May 1, 2006		9. Election Cam Trust Fund C				\$5.00 May Be Added to Fees	•		ck payable partment of S	
10.	OFFICERS AND DI	RECTORS		11.			DDITIONS/CHA	NGES TO O	FICERS AND	DIRECTORS II	V 10
TITLE	•		Delete	TITLE		P, D				Change	X Addition
NAME				NAM		l .	Latvala				
STREET ADDRESS CITY-ST-ZIP					T ADDRESS ST-ZIP		nillips Way Harbor, FL 34	1683	•		
TITLE	· · · · · · · · · · · · · · · · · · ·		☐ Delete	TITLE		VP, D				Change	Addition Addition
NAME			Car Delete	NAM			lardozzi			Onlings	Z ACCINCII
STREET ADDRESS				STRE	T ADDRESS		9th Street, E	ast			
CITY-ST-ZIP				CITY-	ST-ZIP	Treasu	ire Island, FL	33706			
TITLE			☐ Delete	TITLE		S, D				☐ Change	★ Addition
NAME				NAM		Pat Arc					
STREET ADORESS							ungle Ave., N				
CITY-ST-ZIP				CITY	ST-ZIP		ersburg, FL 3	53710			
TITLE NAME			Delete	TITLE		T, D	n Huffor		•	Change	X Addition
STREET ADDRESS				NAME	: Et adoress		n Huffer th Avenue S	outh			
CITY-ST-ZIP					ST-ZIP	3	ersburg, FL				
TITLE	· · · · · · · · · · · · · · · · · · ·		☐ Delete	TITLE		D				Change	
NAME				NAME		Marti N	lewbold				230710011011
STREET ADDRESS					T ADDRESS	4200 5	4th Avenue,	South			
CITY-ST-ZIP	<u> </u>			CJTY-	ST-ZIP	St. Pet	ersburg, FL 3	33711	<u></u>		
TITLE			Delete	TITLE		ID				☐ Change	Addition
NAME STREET ANDRESS				NAME		Alan Pa					
STREET ADDRESS CITY-ST-ZIP							/. Cypress St	reet			
	ertify that the information supplied with	this filing d	loos not qualify for				FL 33607	maria o			
											nfarmati

indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Susan Latvala, Board President SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-26-06

727-322-1758

Document # N05000002501 Life Skills Center Pinellas County, Inc.

No. 11 ADDITIONS/CHANGES TO OFFICERES AND DIRECTORS IN 10

ATTACHMENT	<u> </u>	0030368
☑ Addition	#M05	7.0030368 000025
□Change	□Change	□Change
D James Bennett 1755 th Street St. Petersburg, FL 33701	D Maria Scruggs-Weston 980 Melrose Avenue, South St. Petersburg, FL 33705	D Charlotte Johns-Rich 1100 64 th Avenue, S St. Petersburg, FL 33705
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TITLE NAME STREET ADDRESS CITY-ST-ZIP	TITLE NAME STREET ADDRESS CITY-ST-ZIP