## 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N05000002501

FILED May 02, 2007 Secretary of State

Entity Name: LIFE SKILLS CENTER PINELLAS COUNTY, INC.

**Current Principal Place of Business: New Principal Place of Business:** 4901 CTRL AVE 4901 CENTRAL AVE SAINT PETERSBURG, FL 33710 SAINT PETERSBURG, FL 33710 **Current Mailing Address: New Mailing Address:** 4901 CTRL AVE 4433 MARCHMONT BLVD SAINT PETERSBURG, FL 33710 LAND O LAKES, FL 34638 FEI Number: 20-3007636 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) 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: Name and Address of New Registered Agent: CLARK, CHRISTOPHER B 1901 N 13TH STREET SUITE 300 TAMPA, FL 33605 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition () Delete LATVALA, SUSAN Name: Name: 109 PHILLIPS WAY Address: Address: City-St-Zip: PALM HARBOR, FL 34683 City-St-Zip: Title: () Delete Title: (X) Change ( ) Addition NARDOZZI, VICKI Name: ARCHIBLAD, PATRICIA Name: Address: 11125 9TH ST E Address: 1114 JUNGLE AVE N City-St-Zip: SAINT PETERSBURG, FL 33706 City-St-Zip: ST PETERSBURG, FL 33710 Title: () Delete Title: TD (X) Change ( ) Addition ARCHIBALD, PAT HUFFER, CAROLYN Name: Name: 1114 JUNGLE AVE N Address: Address: 6065 7TH AVE S City-St-Zip: SAINT PETERSBURG, FL 33710 City-St-Zip: ST PETERSBURG, FL 33707 Title: TD ( ) Delete Title: (X) Change ( ) Addition HUFFER, CAROLYN Name: Name: NEWBOLD, MARTI Address: 6065 7TH AVE S Address: 4200 54TH AVENUE S City-St-Zip: SAINT PETERSBURG, FL 33707 City-St-Zip: ST PETERSBURG, FL 33711 Title: () Delete Title: (X) Change ( ) Addition NEWBOLD, MARTI JOHNS-RICH, CHARLOTTE Name: Name: 4200 54TH AVE S 1100 64TH AVENUE SOUTH Address: Address: City-St-Zip: SAINT PETERSBURG, FL 33711 City-St-Zip: ST PETERSBURG, FL 33705 Title: () Delete Title: (X) Change ( ) Addition SCRUGGS-WESTON, MARIA PARRISH, ALAN Name: Name: Address: 3401 W CYPRESS ST Address: 980 MELROSE AVENUE, SOUTH TAMPA, FL 33607 ST PETERSBURG, FL 33705 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: SUSAN LATVALA P 05/02/2007