

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000002501

FILED
Jan 11, 2010
Secretary of State

Entity Name: LIFE SKILLS CENTER PINELLAS COUNTY, INC.

Current Principal Place of Business:

4901 CENTRAL AVE
SAINT PETERSBURG, FL 33710

New Principal Place of Business:

Current Mailing Address:

2500 METROCENTRE BLVD.
SUITE 5
WEST PALM BEACH, FL 33407

New Mailing Address:

FEI Number: 20-3007636

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

DEAL, TONYA A
2500 METROCENTRE BLVD.
SUITE 5
WEST PALM BEACH, FL 33407 US

Name and Address of New Registered Agent:

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:

Title: PD
Name: HUFFER, CAROLYN
Address: 6065 7TH AVENUE SOUTH
City-St-Zip: ST. PETERSBURG, FL 33707

Title: VD
Name: ARCHIBLAD, PATRICIA
Address: 1114 JUNGLE AVENUE N
City-St-Zip: ST PETERSBURG, FL 33710

Title: TD
Name: BROCK, JC
Address: 12276 106TH AVENUE NORTH
City-St-Zip: SEMINOLE, FL 33778

Title: SD
Name: SYRKET, GERALD
Address: 3730 42ND WAY SOUTH #L
City-St-Zip: ST. PETERSBURG, FL 33711

Title: D
Name: MCFARLEY, ADA
Address: 5054 34TH STREET
City-St-Zip: ST. PETERSBURG, FL 33711

I hereby 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 all other like empowered.

SIGNATURE: CAROLYN HUFFER

PRES

01/11/2010

Electronic Signature of Signing Officer or Director

Date