## 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N05000002991

Entity Name: LIFE SKILLS CENTER POLK COUNTY, INC.

FILED May 02, 2007 Secretary of State

Current Principal Place of Business:		New Principal Place of Business:	
407 EAST MEMORIAL BLVD LAKELAND, FL 33801			
Current Mailing Address:		New Mailing Address:	
407 EAST MEMORIAL BLVD LAKELAND, FL 33801		4433 MARCHMONT BLVD LAND O LAKES, FL 34638	
FEI Number: 20-3007314 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:			
WHITELEY, ANDREA 7726 CHASE RD. LAKELAND, FL 33810 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:			
	Electronic Signature of Registered Agent		Date
OFFICERS AND DIRECTORS:		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	PD () Delete WHITELEY, ANDRES 7726 CHASE RD LAKELAND, FL 33810	Title: Name: Address: City-St-Zip:	PD (X) Change ( ) Addition WHITELEY, ANDREA 7726 CHASE RD LAKELAND, FL 33810
Title: Name: Address: City-St-Zip:	VPD () Delete CAUDLE, STEVE DR 7419 FLORAL CIR EAST LAKELAND, FL 33810	Title: Name: Address: City-St-Zip:	VD (X) Change ( ) Addition GIFFORD, RICHARD 104 OAK RUN DRIVE LAKELAND, FL 33809
Title: Name: Address: City-St-Zip:	TD ( ) Delete HICKMAN, JAY 5354 HWY 98 NORTH LAKELAND, FL 33804	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition
Title: Name: Address: City-St-Zip:	SD ( ) Delete DYSERT, BECKY 404C HOWARD AVE LAKELAND, FL 33805	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition
Title: Name: Address: City-St-Zip:	D () Delete JOHNSON, JACK 1421 ALAMEDA DR SOUTH LAKELAND, FL 33805	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	( ) Delete	Title: Name: Address: City-St-Zip:	D ( ) Change (X) Addition MOSES, DAMIEN 745 EAST CHURCH STREET BARTOW, FL 33830

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: ANDREA WHITELEY P 05/02/2007