

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000003873

FILED
Mar 10, 2007
Secretary of State

Entity Name: THE AMOS CENTER OF FLORIDA, INC.

Current Principal Place of Business:

8200 IMMOKALEE RD
NAPLES, FL 34119

New Principal Place of Business:

Current Mailing Address:

8200 IMMOKALEE RD
NAPLES, FL 34119

New Mailing Address:

FEI Number: 84-1676967

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HART, STEPHEN C
624 WIGGINS BAY DR
NAPLES, FL 34110 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: D () Delete
Name: TERRY, ROY W IV
Address: 3631 1ST AVE NW
City-St-Zip: NAPLES, FL 34120

Title: D () Delete
Name: LEFKOW, LISA
Address: 1490 NOTTINGHAM DR
City-St-Zip: NAPLES, FL 34109

Title: D () Delete
Name: HART, STEPHEN C
Address: 624 WIGGINS BAY DR
City-St-Zip: NAPLES, FL 34110

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: STEPHEN C. HART

MR.

03/10/2007

Electronic Signature of Signing Officer or Director

Date