

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000003940

FILED
Apr 24, 2006
Secretary of State

Entity Name: EXTENDED FAMILY CARE HOME, INC.

Current Principal Place of Business:

4631 NW 74TH AVE
LAUDERHILL, FL 33319

New Principal Place of Business:

Current Mailing Address:

4631 NW 74TH AVE
LAUDERHILL, FL 33319

New Mailing Address:

FEI Number: 02-0743254

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ALEEN, LUVENIA DR
4631 NW 74TH AVE
LAUDERHILL, FL 33319 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: P () Delete
Name: ALLEN, LUVENIA DR
Address: 4631 NW 74TH AVE
City-St-Zip: LAUDERHILL, FL 33319

Title: T () Delete
Name: GARLAND, DANENE
Address: 3821 NW 21 ST
City-St-Zip: LAUDERHILL, FL 33311

Title: S () Delete
Name: JONES, YVONNE
Address: 1945 MC GRAWAVE APT 4 G
City-St-Zip: BRONX, NY 10462

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: LUVENIA ALLEN

P

04/24/2006

Electronic Signature of Signing Officer or Director

Date