2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000011883

FILED May 01, 2008 Secretary of State

Entity Nan	ne: EASTSIDE FAMILY INTERVENTION AN	ND COMMUNITY DEVELOPMENT CENTER, INC.		
Current Principal Place of Business:		New Principal Place of Business:		
5321 C.R. 5 SEFFNER,				
Current Mailing Address:		New Mailing Address:	New Mailing Address:	
P.O. BOX 2 BRANDON	2678 I, FL 33509			
	e with s. 607.193(2)(b), F.S., the corporation did no	•	1()	
Name and	Address of Current Registered Agent:	Name and Address of New Registered Agent:		
PRINCE, D 4519 ASHC TAMPA, FL	DRE DR.	PRINCE, DAVID E 4519 ASMORE DR. TAMPA, FL 33610 US		
in the State		purpose of changing its registered office or registered agent, o	or both,	
SIGNATUR	Electronic Signature of Registered Age			
OFFICERS	S AND DIRECTORS:	ADDITIONS/CHANGES TO OFFICERS AND DIR	ECTORS:	
Title: Name: Address: City-St-Zip:	DP () Delete PIRANT, ROBERT L 2707 CENTERVIEW PL BRANDON, FL 33511	Title: () Change () Addition Name: Address: City-St-Zip:		
Title: Name: Address: City-St-Zip:	DVPS () Delete BROWN, CONNIE 2707 CENTERVIEW PL BRANDON, FL 33511	Title: () Change () Addition Name: Address: City-St-Zip:		
Title: Name: Address: City-St-Zip:	DT () Delete PRINCE, DAVID E 4519 ASHMORE DR. TAMPA, FL 33610	Title: () Change () Addition Name: Address: 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: ROBERT L. PIRANT DP 05/01/2008