

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05341

FILED
Apr 28, 2006
Secretary of State

Entity Name: CITIZENS RESIDENTIAL CARE ASSOCIATION OF PASCO COUNTY, INC.

Current Principal Place of Business:

7027 US 19
NEW PORT RICHEY, FL 34653 US

New Principal Place of Business:

139010 FIVAY ROAD
SUITE 8
HUDSON, FL 34667-713 US

Current Mailing Address:

6410 BALDWIN AVE.
NEW PORT RICHEY, FL 34653 US

New Mailing Address:

3201 TRIDENT TERRACE
NEW PORT RICHEY, FL 34652 US

FEI Number: 59-2489490

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TROY, GORDON D
5828 CORKWOOD CT
HOLIDAY, FL 34690 US

Name and Address of New Registered Agent:

JONES, NAOMI
1828 ARCADIA
HOLIDAY, FL 34690 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: NAOMI JONES

04/28/2006

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: GLASS, BETTY J
Address: 6410 BALDWIN AVE.
City-St-Zip: NEW PORT RICHEY, FL 34653

Title: VD () Delete
Name: WALL, JUDITH L
Address: 12902 CEDAR RIDGE DR
City-St-Zip: HUDSON, FL 34669

Title: SD () Delete
Name: BOWES, JUDITH M
Address: 7801 RADCLIFFE CIR
City-St-Zip: PORT RICHEY, FL 34668

Title: TD () Delete
Name: JONES, NAOMI M
Address: 1828 ARCADIA DR
City-St-Zip: HOLIDAY, FL 34690

Title: D () Delete
Name: TROY, GORDON D
Address: 5828 CORKWOOD CT
City-St-Zip: HOLIDAY, FL 34690

Title: D (X) Delete
Name: MONTANO, ALICE H
Address: 5513 RIDDLE RD
City-St-Zip: HOLIDAY, FL 34690

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: HAGAMAN, LYNN MS.
Address: 524 WATERFALL DRIVE
City-St-Zip: SPRING HILL, FL 34608

Title: SEC/ (X) Change () Addition
Name: LAURINO, EMILE A MR.
Address: 3201 TRIDENT TERRACE
City-St-Zip: NEW PORT RICHEY, FL 34652

Title: D (X) Change () Addition
Name: MONTANO, PHILIP
Address: 16248 VERNDAL LANE
City-St-Zip: SPRING HILL, FL 34610

Title: RA (X) Change () Addition
Name: JONES, NAOMI M
Address: 1828 ARCADIA DR
City-St-Zip: HOLIDAY, FL 34690

Title: D (X) Change () Addition
Name: MONTANO, ALICE
Address: 5513 RIDDLE ROAD
City-St-Zip: HOLIDAY, FL 34690

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: EMILE LAURINO

SEC.

04/28/2006

Electronic Signature of Signing Officer or Director

Date