2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000001436

Entity Name: DOCUMENTS CENTER INC

FILED Apr 02, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

4050 NW 35TH WAY 7014 NORTH WEST 79TH AVE

LAUDERDALE LAKES, FL 33309 TAMARAC, FL 33321

Current Mailing Address: New Mailing Address:

4050 NW 35TH WAY 7014 NORTH WEST 79TH AVE

LAUDERDALE LAKES, FL 33309 TAMARAC, FL 33321

FEI Number: FEI Number Applied For (X) FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of New Registered Agent: Name and Address of Current Registered Agent:

GILMORE, BETTY J. GILMORE, BETTY J

4050 NW 35TH WAY 7014 NORTH WEST 79TH AVE LAUDERDALE LAKES, FL 33309 US TAMARAC, FL 33321

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: 04/02/2007

> Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete (X) Change () Addition

GILMORE, BETTY J. GILMORE, BETTY J. Name: Name:

4050 NW 35TH WAY Address: 7014 NORTH WEST 79TH AVE Address: LAUDERDALE LAKES, FL 33309 TAMARAC, FL 33321

City-St-Zip: City-St-Zip:

Title: () Delete Title: () Change () Addition

Name: LEATH-JACKSAINT, TIFFANY Name: Address: 5781 RIVERSIDE DR. Address: City-St-Zip: CORAL SPRINGS, FL 33067 City-St-Zip:

Title: () Delete Title: () Change () Addition

JACKSAINT, JOHNNY Name: Name: Address: 5781 RIVERSIDE DR. Address: City-St-Zip: CORAL SPRINGS, FL 33067 City-St-Zip:

Title: DS () Delete Title: DS (X) Change () Addition GILMORE, NEANDRIA GILMORE, NEANDRIA Name: Name:

7014 NORTH WEST 79TH AVE Address: 4050 NW 35TH WAY Address:

City-St-Zip: LAUDERDALE LAKES, FL 33309 City-St-Zip: TAMARAC, FL 33321

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: BETTY J. GILMORE PF 04/02/2007