

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000001916

FILED
May 22, 2008
Secretary of State

Entity Name: COMMUNITY SERVICES OF PINELLAS COUNTY, INC.

Current Principal Place of Business:

3117 LOOMIS DRIVE
NEW PORT RICHEY, FL 34655

New Principal Place of Business:

Current Mailing Address:

3117 LOOMIS DRIVE
NEW PORT RICHEY, FL 34655

New Mailing Address:

FEI Number: 20-4350082 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

QUINTANA, RICARDO A SR
3117 LOOMIS DRIVE
NEW PORT RICHEY, FL 34655 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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: CEO () Delete
Name: QUINTANA, RICARDO A SR
Address: 3117 LOOMIS DRIVE
City-St-Zip: NEW PORT RICHEY, FL 34655

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: QUINTANA, RICARDO A SR
Address: 3117 LOOMIS DRIVE
City-St-Zip: NEW PORT RICHEY, FL 34655

Title: VP () Change (X) Addition
Name: MARTIN, CANDICE
Address: 3117 LOOMIS DRIVE
City-St-Zip: NEW PORT RICHIE, FL 34655

Title: VP () Change (X) Addition
Name: STAFFORD, STEVEN R
Address: 3117 LOOMIS
City-St-Zip: NEW PORT RICHIE, FL 34655

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: RICARDO ANTONIO QUINTANA SR

PRES

05/22/2008

Electronic Signature of Signing Officer or Director

Date