2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000009598

FILED Jan 24, 2011 Secretary of State

Entity Name: OPEN ARMS SOCIAL AND INTERGENERATIONAL SERVICES, INC.

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

13374 SUNSET LAKES CIRCLE 13327 ZORI LANE

SUITE A SUITE A

WINTER GARDEN, FL 34787 US WINDERMERE, FL 34786 US

Current Mailing Address: New Mailing Address:

P.O. BOX 911

GOTHA, FL 34734 US

FEI Number: 26-1154553 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

AXSON, YOLANDA V
13374 SUNSET LAKES CIRCLE
AXSON, YOLANDA V
13327 ZORI LANE

WINTER GARDEN, FL 34787 US WINDERMERE, FL 34786 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: YOLANDA AXSON 01/24/2011

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: PD

Name: AXSON, YOLANDA V Address: 13327 ZORI LANE

City-St-Zip: WINDERMERE, FL 34786 US

Title: VPD

Name: AXSON, LESTER S SR Address: 13327 ZORI LANE

City-St-Zip: WINDERMERE, FL 34786 US

Title: SD

Name: WIGGINS, BEULAH H Address: 3492 BASIE PLACE City-St-Zip: ORLANDO, FL 32805 US

Title: TRD

Name: WHITE, LINDA J Address: 6426 LEMONWOOD CT City-St-Zip: ORLANDO, FL 32818 US

I hereby 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 all other like empowered.

SIGNATURE: YOLANDA AXSON PD 01/24/2011