

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N09000000137

FILED
Mar 19, 2010
Secretary of State

Entity Name: SECOND TIME AROUND THRIFT SHOPPE, INC.

Current Principal Place of Business:

5206 N PEARL ST
JACKSONVILLE, FL 32208

New Principal Place of Business:

Current Mailing Address:

623 BEECHWOOD ST
JACKSONVILLE, FL 32206

New Mailing Address:

FEI Number: 26-2716751

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

THE COMMUNITY REHABILITATION CENTER, INC
623 BEECHWOOD ST
JACKSONVILLE, FL 32206 US

Name and Address of New Registered Agent:

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: PRES
Name: GAFFNEY, REGINALD
Address: 11636 JERRY ADAMS
City-St-Zip: JACKSONVILLE, FL 32218

Title: VP
Name: TWIGGS, STANLEY
Address: 2292 NETTLE BROOK ST N
City-St-Zip: JACKSONVILLE, FL 32218

Title: CFO
Name: BROWN, BENJAMIN
Address: 5888 RENAULT
City-St-Zip: JACKSONVILLE, FL 32244

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: BENJAMIN BROWN

CFO

03/19/2010

Electronic Signature of Signing Officer or Director

Date