2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N13089

FILED Jul 14, 2006 Secretary of State

Entity Name: PALM HARBOR COMMUNITY SERVICES AGENCY, INC.

Current Principal Place of Business: New Principal Place of Business: 2330 NEBRASKA AVENUE PALM HARBOR, FL 34683 **Current Mailing Address: New Mailing Address:** POST OFFICE BOX 1227 **1500 16TH STREET** PALM HARBOR, FL 34682 PALM HARBOR, FL 34683 FEI Number: 59-2720211 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () 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: SALZMAN, ANDREW J ESQ. SHANNON HATCHER 2570 CORAL LANDINGS BLVD. 1500 16TH STREET PALM HARBOR, FL 34683 US SUITE 201 PALM HARBOR, FL 34684 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: SHANNON HATCHER 07/14/2006 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition GAGLIARDO, BENJAMIN J Name: Name: 660 SANDY HOOK ROAD Address: Address: City-St-Zip: PALM HARBOR, FL 34683 City-St-Zip: Title: () Delete Title: (X) Change () Addition ANSON, ARNOLD Name: KLEYMAN, JAMES Name: Address: 3410 STONEHAVEN COURT E Address: 1473 INDIAN TRAILS SOUTH City-St-Zip: PALM HARBOR, FL 34684 City-St-Zip: PALM HARBOR, FL 34683 Title: () Delete Title: DT (X) Change () Addition FREIDINGER, TED L VALK, DREW Name: Name: Address: P.O. BOX 736 Address: 4219 LAKE AVENUE City-St-Zip: PALM HARBOR, FL 34682 City-St-Zip: PALM HARBOR, FL 34684 Title: DS () Delete Title: DS (X) Change () Addition VALK, DREW Name: Name: OLIVERI, MADELINE Address: 4219 LAKE AVENUE Address: 1261 GILLESPIE DRIVE N. City-St-Zip: PALM HARBOR, FL 34684 City-St-Zip: PALM HARBOR, FL 34684 Title: Title: () Delete () Change () Addition DOWNES, JOHN Name: Name: 803 SPARROW AVENUE Address: Address: City-St-Zip: PALM HARBOR, FL 34683 City-St-Zip: Title: () Delete Title: (X) Change () Addition

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.

Name:

Address:

City-St-Zip:

MEYERS, JOHN

1153 GILLESPIE DRIVE N

PALM HARBOR, FL 34684

SIGNATURE: SHANNON HATCHER AA 07/14/2006

OLIVERI. MADELINE

1261 GILLESPIE DRIVE N.

PALM HARBOR, FL 34684

Name:

Address:

City-St-Zip: