2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N13089

FILED Apr 30, 2008 Secretary of State

Entity Name: PALM HARBOR COMMUNITY SERVICES AGENCY, INC.

Current Principal Place of Business: New Principal Place of Business: 2330 NEBRASKA AVENUE 1500 16TH STREET PALM HARBOR, FL 34683 PALM HARBOR, FL 34683 **Current Mailing Address: New Mailing Address:** 1500 16TH STREET PALM HARBOR, FL 34683 FEI Number: 59-2720211 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: SHANNON HATCHER MARY MASON 1500 16TH STREET 1500 16TH STREET PALM HARBOR, FL 34683 PALM HARBOR, FL 34683 US 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: MARY L. MASON 04/30/2008 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: DC () Delete () Change () Addition MYERS, JOHN Name: Name: 1153 GILLESPIE DRIVE N Address: Address: City-St-Zip: PALM HARBOR, FL 34684 City-St-Zip: Title: DV Title: () Delete (X) Change () Addition VALK, DREW Name: VALK, DREW Name: Address: 4219 LAKE AVENUE Address: 4219 LAKE AVENUE City-St-Zip: PALM HARBOR, FL 34684 City-St-Zip: PALM HARBOR, FL 34684 Title: () Delete Title: () Change () Addition SMIRLIS, MARGUERITE Name: Name: 28870 US HWY 19 N Address: Address: City-St-Zip: CLEARWATER, FL 33761 City-St-Zip: Title: DS () Delete Title: DS (X) Change () Addition Name: OLIVERI, MADELINE Name: GOODWIN, HEATHER Address: 1261 GILLESPIE DRIVE N. Address: 495 PALM AVENUE City-St-Zip: PALM HARBOR, FL 34684 City-St-Zip: PALM HARBOR, FL 34683 Title: () Delete Title: (X) Change () Addition DOWNES, JOHN KLEYMAN, JIM Name: Name: 803 SPARROW AVENUE 1473 INDIAN TRAILS SOUTH Address: Address: City-St-Zip: PALM HARBOR, FL 34683 City-St-Zip: PALM HARBOR, FL 34683 Title: () Delete Title: (X) Change () Addition SMITH, MIKE SMITH, MIKE Name: Name: Address: 2197 BRENT PLACE Address: 2197 BRENT PLACE PALM HARBOR, FL 34683 PALM HARBOR, FL 34683 City-St-Zip: City-St-Zip:

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: JOHN MYERS DC 04/30/2008