


2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 08, 2004 8:00 am
Secretary of State

04-08-2004 90023 048 ****61.25

DOCUMENT # N19342 1. Entity Name HABILITATION MANAGEMENT SERVICES, INC.																																									
Principal Place of Business 2354 CHRISTOPHER PL TALLAHASSEE, FL 32308			Mailing Address 2354 CHRISTOPHER PL TALLAHASSEE, FL 32308																																						
2. Principal Place of Business 1831 Fiddler Ct Suite, Apt. #, etc.		3. Mailing Address 1831 Fiddler Ct Suite, Apt. #, etc.																																							
City & State Tallahassee FL		City & State Tallahassee FL		4. FEI Number 59-2824952																																					
Zip 32308		Country USA		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required																																					
6. Name and Address of Current Registered Agent PHILLIPS, JANICE G. 7469 CREEKRIDGE CIR TALLAHASSEE, FL 32309				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City <div style="display: flex; justify-content: space-between;"> FL Zip Code </div>																																					
8. 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. I am familiar with, and accept the obligations of registered agent.																																									
SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>																																									
Filing Fee is \$61.25 Due by May 1, 2004		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees																																					
<div style="display: flex; justify-content: space-between;"> <div style="width: 48%;"> 10. OFFICERS AND DIRECTORS <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 15%;">TITLE</td> <td style="width: 65%;">PD PHILLIPS, JANICE G. 7469 CREEKRIDGE CIR TALLAHASSEE, FL 32309</td> <td style="width: 20%; text-align: right;"><input type="checkbox"/> Delete</td> </tr> <tr> <td>TITLE</td> <td>DST RENAUD, LYNN 11914 STEED'S RUN TALLAHASSEE, FL 32317</td> <td style="text-align: right;"><input type="checkbox"/> Delete</td> </tr> <tr> <td>TITLE</td> <td>D MURPHY, JILL 4901 LAKE PARK DRIVE TALLAHASSEE, FL 32311</td> <td style="text-align: right;"><input type="checkbox"/> Delete</td> </tr> <tr> <td>TITLE</td> <td></td> <td style="text-align: right;"><input type="checkbox"/> Delete</td> </tr> <tr> <td>TITLE</td> <td></td> <td style="text-align: right;"><input type="checkbox"/> Delete</td> </tr> <tr> <td>TITLE</td> <td></td> <td style="text-align: right;"><input type="checkbox"/> Delete</td> </tr> </table> </div> <div style="width: 48%;"> 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 15%;">TITLE</td> <td style="width: 65%;"></td> <td style="width: 20%; text-align: right;"><input type="checkbox"/> Change <input type="checkbox"/> Addition</td> </tr> <tr> <td>TITLE</td> <td></td> <td style="text-align: right;"><input type="checkbox"/> Change <input type="checkbox"/> Addition</td> </tr> <tr> <td>TITLE</td> <td></td> <td style="text-align: right;"><input type="checkbox"/> Change <input type="checkbox"/> Addition</td> </tr> <tr> <td>TITLE</td> <td></td> <td style="text-align: right;"><input type="checkbox"/> Change <input type="checkbox"/> Addition</td> </tr> <tr> <td>TITLE</td> <td></td> <td style="text-align: right;"><input type="checkbox"/> Change <input type="checkbox"/> Addition</td> </tr> <tr> <td>TITLE</td> <td></td> <td style="text-align: right;"><input type="checkbox"/> Change <input type="checkbox"/> Addition</td> </tr> </table> </div> </div>						TITLE	PD PHILLIPS, JANICE G. 7469 CREEKRIDGE CIR TALLAHASSEE, FL 32309	<input type="checkbox"/> Delete	TITLE	DST RENAUD, LYNN 11914 STEED'S RUN TALLAHASSEE, FL 32317	<input type="checkbox"/> Delete	TITLE	D MURPHY, JILL 4901 LAKE PARK DRIVE TALLAHASSEE, FL 32311	<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.																																									
SIGNATURE: <u>Janice G. Phillips</u> <u>1/14/04</u> <u>850877 4393</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>																																									