2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N21616

FILED Mar 10, 2008 Secretary of State

Entity Name: ADVOCACY CENTER FOR PERSONS WITH DISABILITIES, INC.

Current P	Principal Place of Business:	New Principal Place of Business:
	ITERVIEW DRIVE	
102 TALLAHA	SSEE, FL 32301 US	
Current N	Mailing Address:	New Mailing Address:
	-	
102	NTERVIEW DRIVE	
	SSEE, FL 32301 US r: 59-2824728 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
	,	
Name and	d Address of Current Registered Age	nt: Name and Address of New Registered Agent:
TIMES BU 1000-N AS	/I, HUBERT A JILDING SHLEY DR., STE. 640 FL 33602 US	
	e named entity submits this statement for te of Florida.	the purpose of changing its registered office or registered agent, or both,
SIGNATU	IRE:	
	Electronic Signature of Registere	d Agent Date
OFFICER	S AND DIRECTORS:	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS
Title: Name: Address: City-St-Zip:	P () Delete JONES, DOUGLAS 10400 SOVEREIGN DR LARGO, FL 33774 US	Title: C (X) Change () Addition Name: HULL, HELIA Address: 14213 LAKE UNDERHILL ROAD City-St-Zip: ORLANDO, FL 32828 US
Title: Name: Address: City-St-Zip:	VP () Delete HULL, HELIA 14213 LAKE UNDERHILL ROAD ORLANDO, FL 32828 US	Title: VC (X) Change () Addition Name: SCHOEMANN, PETER Address: 6932 SYLVAN WOODS DR City-St-Zip: SANFORD, FL 32771 US
Title: Name:	ED () Delete WESTON, GARY J	Title: () Change () Addition Name:
	2728 CENTERVIEW DRIVE, STE 102 TALLAHASSEE, FL 32301 US	Address: City-St-Zip:
Address: City-St-Zip: Title: Name: Address: City-St-Zip:		Address:
City-St-Zip: Title: Name: Address:	TALLAHASSEE, FL 32301 US FIN () Delete SCHOEMANN, PETER 6932 SYLVAN WOODS DR	Address: City-St-Zip: Title: TR (X) Change () Addition Name: WHITNEY, ROBERT E Address: 2728 CENTERVIEW DRIVE, STE 102

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: ROBERT WHITNEY TR 03/10/2008