## 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N22071

FILED Apr 28, 2005 Secretary of State

Entity Name: SPACE COAST EARLY INTERVENTION CENTER, INC.

**Current Principal Place of Business: New Principal Place of Business:** 3661 S. BABCOCK ST. STE D MELBOURNE, FL 32901 **New Mailing Address: Current Mailing Address:** 3661 S. BABCOCK ST. STE D MELBOURNE, FL 32901 US FEI Number: 59-2858471 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: SHINN, SALLY DR 1347 ROCKLEDGE DR US ROCKLEDGE, FL 32955 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: (X) Change ( ) Addition () Delete SHINN, SALLY DR SHINN, SALLY DR Name: Name: 1347 ROCKLEDGE DR Address: 1347 ROCKLEDGE DR Address: City-St-Zip: ROCKLEDGE, FL 32955 BR City-St-Zip: ROCKLEDGE, FL 32955 Title: () Delete Title: (X) Change ( ) Addition TORPEY, JOANN Name: TORPEY, JOANN Name: Address: 190 PINELLAS LN #509 Address: 190 PINELLAS LN #311 City-St-Zip: COCOA BEACH, FL 32931 BR City-St-Zip: COCOA BEACH, FL 32931 Title: () Delete Title: (X) Change ( ) Addition DEWIGHT, JAMES Name: CLOW, TRISH Name: FLORIDA AIR ACADEMY 1950 S ACADEMY DR. 737 NICKLAUS DR Address: Address: City-St-Zip: MELBOURNE, FL 32901 BR City-St-Zip: MELBOURNE, FL 32940 Title: () Delete Title: (X) Change ( ) Addition Name: HALLEY, LEIGH Name: HALLEY, LEIGH 148 LANTERNBACK ISLAND DRIVE 148 LANTERNBACK ISLAND DRIVE Address: Address: City-St-Zip: SATELLITE BEACH, FL 32937 BR City-St-Zip: SATELLITE BEACH, FL 32937 Title: () Delete Title: (X) Change ( ) Addition ANDERSON, PATRICK COOPER, WAYNE Name: Name: 4160 WINDOVER WAY 1840 CANTERBURY DR. Address: Address: City-St-Zip: MELBOURNE, FL 32934 City-St-Zip: INDIALANTIC, FL 32903 Title: () Delete Title: ( ) Change (X) Addition SCHAEFER, SHEILA Name: Name: Address: Address: 411 AVENUE A MELBOURNE BEACH, FL 32951 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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: SALLY SHINN P 04/28/2005