

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N26954

FILED  
May 02, 2007  
Secretary of State

Entity Name: DRUG FREE, INC.

## Current Principal Place of Business:

1018 NORTH BLVD. W  
LEESBURG, FL 34748 US

## New Principal Place of Business:

## Current Mailing Address:

P.O. BOX 491077  
LEESBURG, FL 34749 US

## New Mailing Address:

FEI Number: 59-2962440 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:

MITCHELL, RUBY  
6721 FERN CIRCLE  
LEESBURG, FL 34748 US

## Name and Address of New Registered Agent:

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:

Title: P ( ) Delete  
Name: MITCHELL, RUBY  
Address: 6721 FERN CIRCLE  
City-St-Zip: LEESBURG, FL 34748

Title: VD ( ) Delete  
Name: MITCHELL, PERNELL  
Address: 115 E. MAGNOLIA AVE.  
City-St-Zip: LEESBURG, FL 34748

Title: SD ( ) Delete  
Name: JACKSON, JOHNNIE  
Address: 1106 LUCAS STREET  
City-St-Zip: LEESBURG, FL 34748

Title: TD ( ) Delete  
Name: BRIEN, BOWERS  
Address: 202 WATERS EDGE DRIVE  
City-St-Zip: LEESBURG, FL 34748

Title: D ( ) Delete  
Name: WALKER, KENEA  
Address: P.O. BOX 491077  
City-St-Zip: LEESBURG, FL 34749

Title: D ( ) Delete  
Name: MITCHELL, JASMINE  
Address: P.O. BOX 491077  
City-St-Zip: LEESBURG, FL 34749

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: D (X) Change ( ) Addition  
Name: DUGGINS, PEGGY  
Address: 105 JOSEPHINE AVE  
City-St-Zip: FRUITLAND PARK, FL 34731

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: RUBY MITCHELL

P

05/02/2007

Electronic Signature of Signing Officer or Director

Date