

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N31660

FILED  
Feb 28, 2006  
Secretary of State

Entity Name: CHOICE SINGLE FRIENDS IN FAITH, INC.

## Current Principal Place of Business:

4025 BLUFF OAK CT.  
PALM HARBOR, FL 34684 US

## New Principal Place of Business:

6363 9TH AVE N  
ST. PETERSBURG, FL 33710 US

## Current Mailing Address:

4025 BLUFF OAK CT.  
PALM HARBOR, FL 34684 US

## New Mailing Address:

PO BOX 40200  
ST. PETERSBURG, FL 33743 US

FEI Number: 59-2958082

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

GROTE, JOE  
6533 9TH AVE N  
ST PETERSBURG, FL 33710 US

## Name and Address of New Registered Agent:

OFFICE FOR YOUTH AND YOUNG ADULT MINISTRY  
6363 9TH AVE N  
ST PETERSBURG, FL 33710 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: ANNA MARIE WRIGHT

02/28/2006

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: DST ( ) Delete  
Name: SCHAEFER, CATHERINE  
Address: 4025 BLUFF OAK CT  
City-St-Zip: PALM HARBOR, FL 34684

Title: DC ( ) Delete  
Name: COLLINS, ANNE  
Address: 16125 E RAMBLING VINE DR  
City-St-Zip: TAMPA, FL 33624

Title: DAC (X) Delete  
Name: NOWAK, MARY A  
Address: 7100 PICOTEE CT.  
City-St-Zip: NEW PORT RICHEY, FL 34653

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: AD (X) Change ( ) Addition  
Name: WRIGHT, ANNA MARIE  
Address: 6363 9TH AVE N  
City-St-Zip: ST. PETERSBURG, FL 33710 US

Title: D (X) Change ( ) Addition  
Name: MEEGAN, SDB, BRO. JERRY  
Address: 6363 9TH AVE N  
City-St-Zip: ST. PETERSBURG, FL 33710 US

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

I hereby certify that the information supplied with this filing does not qualify for the 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: ANNA MARIE WRIGHT

AD

02/28/2006

Electronic Signature of Signing Officer or Director

Date