

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N33093

FILED
Sep 08, 2006
Secretary of State

Entity Name: JOYCENTER, INC.

Current Principal Place of Business:

3073 SE JEFFERSON
STUART, FL 34997

New Principal Place of Business:

51 KINDRED ST
STUART, FL 34994

Current Mailing Address:

PO BOX 212
STUART, FL 34995

New Mailing Address:

FEI Number: 65-0131176 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:

MURRAY, PETER
3073 SE DIXIE
STUART, FL 34997 US

Name and Address of New Registered Agent:

MURRAY, PETER
51 KINDRED ST
STUART, FL 34994 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: PETER MURRAY

09/08/2006

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: MURRAY, PETER
Address: 747 NE ALICE ST.
City-St-Zip: RIO, FL 34957

Title: D () Delete
Name: MURRAY, ISIAH
Address: 747 NE ALICE
City-St-Zip: RIO, FL 34957

Title: D () Delete
Name: BURNHAM, BARBARA
Address: 3545 SE DIXIE
City-St-Zip: STUART, FL 34997

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: MURRAY, PETER
Address: PO BOX 212
City-St-Zip: STUART, FL 34995

Title: D (X) Change () Addition
Name: COULTER, BRENDA
Address: PO BOX 212
City-St-Zip: STUART, FL 34995

Title: D (X) Change () Addition
Name: GILLINGS, MARCIA
Address: PO BOX 212
City-St-Zip: STUART, FL 34995

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: PETER MURRAY

D

09/08/2006

Electronic Signature of Signing Officer or Director

Date