2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # N38831

1. Entity Name

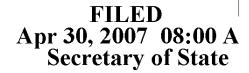
JAMES B. SANDERLIN FAMILY SERVICE CENTER, INC.



Principal Place of Business

2335 22ND AVENUE S. ST. PETERSBURG, FL 33712 Mailing Address

2335 22ND AVENUE S. ST. PETERSBURG, FL 33712





DO NOT WRITE IN THIS SPACE

04132007 No Chg-NP

CR2E037 (4/06)

4. FEI Number 59-3024059 Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Regulred

6. Name and Address of Current Registered Agent

SANDERLI, JAMES B 2335 22ND AVENUE SOUTH ST. PETERSBURG, FL 33712

SIGNATURE

DO NOT WRITE IN THIS SPACE

the obligations of registered agent.				
SIGNATURE		E Registered Agent signature required when reinstating)	DATE	
	Filing Fee Is \$61.25 Due by May 1, 2007 9. Election Campai Trust Fund Cont			
10.	OFFICERS AND DIRECTORS	,		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BRITT, LOUNELL 3527 27 AVENUE SOUTH ST. PETERSBURG, FL 33712			
TITLE NAME STREET ADDRESS CIJY-ST-ZIP	PD SANDERLIJN, RAYMOND 2709 17 STREET SOUTH SAINT PETERSBURG, FL 33712		U00000747494 05/17/07-80027-0;	21 61.25
TITLE NAME STREET ADDRESS CITY+ST-ZIP	1VP KING, DIANNA 2343 6 AVENUE NORTH SAINT PETERSBURG, FL 33713	DO	NOT WRITE	
TITLE NAME STREET ADDRESS CITY+ST-ZIP	2VP SANDERLIN, RAYMOND 2821 46 AVE SOUTH SAINT PETERSBURG, FL 33712	IN.	THIS SPACE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD SANDERLIN, GWEN 2709 19 STREET SOUTH SAINT PETERSBURG, FL_337,12			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD JUNEVICUS, GERALD 4817 9 STRET SOUTH SAINT PETERSBURG, FL 33705			
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 signature shall have the same legal effect as if made under cath; 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all othey file empowered.				

8. 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. I am familiar with, and accept