2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N40825

Entity Name: CHARIS CENTER, INC.

FILED Apr 30, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 4041 BAHIA VISTA STREET SARASOTA, FL 342322421 **Current Mailing Address: New Mailing Address:** 4041 BAHIA VISTA STREET SARASOTA, FL 342322421 FEI Number: 65-0235200 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: DENLINGER, GLEN 4041 BAHIA VISTA ST SARASOTA, FL 34232 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition BEACHEY, DALE Name: Name: 4929 OLD CREEK DR Address: Address: City-St-Zip: SARASOTA FL 34233 City-St-Zip: Title: Title: () Delete () Change () Addition REID, DENNIS Name: Name: Address: 7045 W. TAMIAMI TR Address: City-St-Zip: SARASOTA, FL 34243 City-St-Zip: Title: () Delete Title: () Change () Addition HENRY-RINEHART, JAN REV. Name: Name: Address: 700 E DEARBORN ST Address: City-St-Zip: ENGLEWOOD, FL 34223 City-St-Zip: Title: Title: (X) Change () Addition () Delete Name: JACOCKS, SUSAN Name: MARSDEN, RICK REV 4231 HYMONT AVE. Address: Address: 222 S. PALM AVE City-St-Zip: SARASOTA, FL 34231 City-St-Zip: SARASOTA, FL 34236 Title: () Delete Title: () Change () Addition STOLL, DALE Name: Name: 1841 SANDELWOOD DRIVE Address: Address: City-St-Zip: SARASOTA, FL 34231 City-St-Zip: Title: () Delete Title: (X) Change () Addition YODER, DENNIS WALLS, BETTY MRS Name: Name: Address: 8374 MARKET ST #487 Address: 7036 US OPEN LOOP LAKEWOOD RANCH, FL 34202 BRADENTON, FL 34202 City-St-Zip: City-St-Zip:

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: GLEN DENLINGER D 04/30/2008