2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 12, 2009
Secretary of State

DOCUMENT# N47517

Entity Name: CENTRAL HEALTHY START, INCORPORATED

Current Principal Place of Business:

1785 NW 80TH BLVD
GAINESVILLE, FL 32606 US

New Principal Place of Business:

Current Mailing Address:

1785 NW 80TH BLVD
GAINESVILLE, FL 32606 US

New Mailing Address:

FEI Number: 59-3119439 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

OLIVA, STEVEN J
1785 NW 80TH BLVD
GAINESVILLE, FL 32606 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: TD ( ) Delete
Name: EVERETT, JUDITH
Address: 900 EMERSON ROAD
City-St-Zip: BROOKSVILLE, FL 34601 US

Title: VD ( ) Delete
Name: RAGS, JEAN
Address: 20 N. MAIN STREET RM 202
City-St-Zip: BROOKSVILLE, FL 346012817 US

Title: SD ( ) Delete
Name: SELG, ISA
Address: 4057 CALIFORNIA STREET
City-St-Zip: BROOKSVILLE, FL 34604 US

Title: PD (X) Delete
Name: LOOMIS, SUE
Address: 10461 QUALITY DRIVE
City-St-Zip: SPRING HILL, FL 34609 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: TD (X) Change ( ) Addition
Name: OLSZANSKI, SHERRY
Address: PO BOX 491000
City-St-Zip: LEESBURG, FL 34749 US

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

Title: SD (X) Change ( ) Addition
Name: WYNNS, VICKY
Address: 600 EAST DIXIE DRIVE
City-St-Zip: LEESBURG, FL 32748 US

Title: ( ) Change ( ) Addition
Name:
Address:
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: STEVEN J OLIVA CEO 03/12/2009

Electronic Signature of Signing Officer or Director — Date