2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 09, 2006
Secretary of State

DOCUMENT# N49230

Entity Name: ST. NICHOLAS PLACE, INC.

Current Principal Place of Business:

2418 SCHUMACHER AVE
JACKSONVILLE, FL 32207

New Principal Place of Business:

Current Mailing Address:

3311 BEACH BLVD.
JACKSONVILLE, FL 322073893

New Mailing Address:

1050 N DAVIS STREET
JACKSONVILLE, FL 32209

FEI Number: 59-3246293 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

DUVALL, JOHN E ESQ.
225 WATER STREET, SUITE 710
JACKSONVILLE, FL 32202 US

Name and Address of New Registered Agent:

WHITTAKER, JAMES P
1050 N DAVIS STREET
JACKSONVILLE, FL 32209 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: JAMES P WHITTAKER 01/09/2006
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: CD ( ) Delete
Name: DEFOOR, DAN
Address: 929 BROOKMONT AVE E
City-St-Zip: JACKSONVILLE, FL 32211

Title: DS ( ) Delete
Name: MILLER, MICHELLE
Address: 647 MONTEGO RD WEST
City-St-Zip: JACKSONVILLE, FL 32216

Title: D ( ) Delete
Name: CORA, LALLI
Address: 5620 STELTON AVE
City-St-Zip: JACKSONVILLE, FL 32277

Title: D ( ) Delete
Name: ROSELLE, E.B.
Address: 3149 LAUREL GROVE N
City-St-Zip: JACKSONVILLE, FL 32223

Title: D (X) Delete
Name: DEFOOR, JOYNIE
Address: 929 BROOKMONT AVE. EAST
City-St-Zip: JACKSONVILLE, FL 32211

Title: D (X) Delete
Name: LIPMAN, JEANETTE
Address: 647 MONTEGO ROAD WEST
City-St-Zip: JACKSONVILLE, FL 32211

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition
Name: DEFOOR, DAN
Address: 929 BROOKMONT AVE E
City-St-Zip: JACKSONVILLE, FL 32211

Title: D (X) Change ( ) Addition
Name: JOHNSON, DEBORAH A
Address: 5310 HAMPTON GABLE COURT WEST
City-St-Zip: JACKSONVILLE, FL 32257

Title: D (X) Change ( ) Addition
Name: KIRBY, LISA
Address: 2418 SCHUMACHER AVENUE
City-St-Zip: JACKSONVILLE, FL 32207

Title: D (X) Change ( ) Addition
Name: MORAN, BERNADETTE
Address: 3312 ST JOHNS AVENUE
City-St-Zip: JACKSONVILLE, FL 32205

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

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: DEBORAH JOHNSON D 01/09/2006
Electronic Signature of Signing Officer or Director Date