2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N49580

Entity Name: PEER CENTER, INC.

FILED Mar 16, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

4545 NW 9TH AVENUE

FORT LAUDERDALE, FL 33309 US

Current Mailing Address: New Mailing Address:

4545 NW 9TH AVENUE

FORT LAUDERDALE, FL 33309 US

FEI Number: 65-0395121 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of New Registered Agent: Name and Address of Current Registered Agent:

O'MARA, ROGER HAYES, BILLY J 180 NW 24 COURT 8981 NW 78 STREET POMPANO BEACH, FL 33064 US APT 278

TAMARAC, FL 33321 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: BILLY J HAYES 03/16/2006

> Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

EXED () Delete (X) Change () Addition

O'MARA, ROGER Name: HAYES, BILLY J Name: 180 NW 24 COURT Address: 8981 NW 78 STREET APT 278 Address:

City-St-Zip: POMPANO BEACH, FL 33064 City-St-Zip: TAMARAC, FL 33321

Title: Title: (X) Change () Addition () Delete FRANZEN, RUTH Name: ESKO, MARC Name:

Address: 2225 NW 6 TERR. Address: 213 SW 20 STREET APT 4

FORT LAUDERDALE, FL 33311 City-St-Zip: City-St-Zip: FORT LAUDERDALE, FL 33315

Title: () Delete Title: (X) Change () Addition DABANION, RONALD DR. Name: DABANION, RONALD DR. Name:

OCEAN VIEW RTRMNT HSE/909 NE 17 WAY OCEAN VIEW RTRMNT HSE/3091 NW 43 ST Address: Address:

City-St-Zip: FORT LAUDERDALE, FL 33304 City-St-Zip: LAUDERDALE LAKES, FL 33309

(X) Change () Addition Title: VC () Delete Title: VC

Name: MOENING, MARK Name: FRANZEN, RUTH 10551 W BROWARD BLVD APT 111 Address: Address: 2225 NW 6 TERRACE City-St-Zip: PLANTATION, FL 33324 City-St-Zip: FT LAUDERDALE, FL 33311

Title: () Delete Title: (X) Change () Addition FAST, JOHN FAST, JOHN Name: Name:

1691 E CLASSICAL BLVD 1691 E CLASSICAL BLVD Address: Address:

City-St-Zip: DELRAY BEACH, FL 334451204 City-St-Zip: DELRAY BEACH, FL 33445

Title: () Delete Title: () Change (X) Addition

MCQUILKIN, KATHLEEN Name: Name: Address: Address: 1205 SW 1ST STREET APT 1 FT LAUDERDALE, FL 33312 City-St-Zip: 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: RONALD DABANIAN C 03/16/2006