

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N92000000798

FILED
Apr 30, 2008
Secretary of State

Entity Name: INTERACT COUNCIL FOR HUMAN DEVELOPMENT, INC.

Current Principal Place of Business:

704 BRUNNELL PKWY
LAKELAND, FL 33815

New Principal Place of Business:

704 BRUNNELL PKWY
LAKELAND, FL 33802

Current Mailing Address:

P.O. BOX 550
LAKELAND, FL 33802

New Mailing Address:

P O BOX 550
LAKELAND, FL 33802

FEI Number: 59-3161354

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LAILER, JR, WALTER K
704 BRUNNELL PKWY/PO BOX 550
LAKELAND, FL 33802 US

Name and Address of New Registered Agent:

LAILER, JR, WALTER K
704 BRUNNELL PKWY
LAKELAND, FL 33802 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:

04/30/2008

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PCEO () Delete
Name: LAIDLER, WALTER K, JR
Address: 339 HOWARD AVE/POB 1271
City-St-Zip: LAKELAND, FL 33802

Title: D () Delete
Name: WANDA H, JACKSON
Address: 4311 CREEKGLEN LANE
City-St-Zip: LAKELAND, FL 33811

Title: S/T () Delete
Name: MIRANDA, SLOAN
Address: 2025 SYLVESTER RD, UNIT L2
City-St-Zip: LAKELAND, FL 33803

Title: D () Delete
Name: DALEY, JUSTIN
Address: 712 LIMBER LN
City-St-Zip: LAKELAND, FL 33810

Title: D () Delete
Name: DIANE H, ROBINSON
Address: 1445 LOETLLA AVE
City-St-Zip: LAKELAND, FL 33805

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PCEO (X) Change () Addition
Name: LAIDLER, WALTER K JR
Address: 339 HOWARD AVE/BOX 12
City-St-Zip: LAKELAND, FL 33802

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

Title: D (X) Change () Addition
Name: HART, NORDICA
Address: 1715 LOWRY AVE
City-St-Zip: LAKELAND, FL 33801

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

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

Title: D () Change (X) Addition
Name: COBB, DEBBIE
Address: 5613 JOE MAR GARVIN WAY
City-St-Zip: PLANT CITY, FL 33567

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: WALTER K LAIDLER, JR

PRES

04/30/2008

Electronic Signature of Signing Officer or Director

Date