

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000000975

FILED
Jan 20, 2006
Secretary of State

Entity Name: THE FAMILY LAW CONNECTION, INC.

Current Principal Place of Business:

1750 17TH ST
B-3
SARASOTA, FL 34234 US

New Principal Place of Business:

Current Mailing Address:

1750 17TH ST
B-3
SARASOTA, FL 34234 US

New Mailing Address:

FEI Number: 65-0415147 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

ROBERTS, DENISE L
3428 RIVIERA DR
SARASOTA, FL 34232 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: PD () Delete
Name: FROMAN, ANDREW
Address: 3778 EAGLE HAMMOCK DR
City-St-Zip: SARASOTA, FL 34240

Title: VP () Delete
Name: WATSON, MARCIA
Address: 7920 MIDNIGHT PASS RD
City-St-Zip: SARASOTA, FL 34242

Title: ED () Delete
Name: ROBERTS, DENISE
Address: 3428 RIVIERA DR
City-St-Zip: SARASOTA, FL 34232

Title: S () Delete
Name: MICHAELSON, SUSANNAH
Address: 4580 WINDSOR PARK
City-St-Zip: SARASOTA, FL 34235

Title: TD () Delete
Name: BARNUM, BARBARA
Address: 1225 CORNISH COURT
City-St-Zip: SARASOTA, FL 34232

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VP (X) Change () Addition
Name: JOFFE, LINDA
Address: 7061 WOODMORE TERRACE
City-St-Zip: LAKEWOOD RANCH, FL 34202

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

Title: S (X) Change () Addition
Name: PATMAGRIAN, LEIGH
Address: 3939 GROVELAND AVE
City-St-Zip: SARASOTA, FL 34231

Title: TD (X) Change () Addition
Name: MUSCO, STEPHEN
Address: 4717 MEADOWVIEW CIRCLE
City-St-Zip: SARASOTA, FL 34233

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: DENISE ROBERTS

ED

01/20/2006

Electronic Signature of Signing Officer or Director

Date