2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000005847

FILED Jan 13, 2006 Secretary of State

Entity Name: CHILDS PARK YOUTH INITIATIVE COUNCIL, INC.

Current Principal Place of Business: New Principal Place of Business: 300-49 TH ST. SOUTH SAINT PETERSBURG, FL 33707 **Current Mailing Address: New Mailing Address:** 300-49 TH ST. SOUTH SAINT PETERSBURG, FL 33707 FEI Number: 59-3541598 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: HILL, TRACEY S 300 49TH ST. SOUTH SAINT PETERSBURG, FL 33707 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition () Delete CUTHBERTSON, LOTTIE Name: Name: 4534 21ST AVENUE SOUTH Address: Address: City-St-Zip: SAINT PETERSBURG, FL 33711 City-St-Zip: Title: VCD () Delete Title: () Change () Addition Name: ECHOLS, CHRISTAL Name: Address: 1459 ALHAMBRA WAY SOUTH Address: City-St-Zip: SAINT PETERSBURG, FL 33705 City-St-Zip: Title: () Delete Title: () Change () Addition GOMILLION, SHELIA Name: Name: 631 50TH AVENUE SOUTH Address: Address: City-St-Zip: SAINT PETERSBURG, FL 33705 City-St-Zip: Title: SD () Delete Title: () Change () Addition Name: WILSON, LISA Name: 2301 41ST STREET SOUTH Address: Address: City-St-Zip: SAINT PETERSBURG, FL 33711 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: CHERYL E. JOHNSON AA 01/13/2006