2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2004
Secretary of State

DOCUMENT# N97000006331

Entity Name: A-FAMILY'S CHOICE, INC.

Current Principal Place of Business:

16400 NE 19 AVE
NORTH MIAMI BEACH, FL 33162

New Principal Place of Business:

Current Mailing Address:

16499 NE 19TH AVE
#103
NORTH MIAMI BEACH, FL 33162

New Mailing Address:

111 N. E 19TH. AVENUE
NORTH MIAMI BEACH, FL 33162 US

FEI Number: 65-0794050 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CANODY, CHARLES
111 NE 170 ST
MIAMI, FL 33162

Name and Address of New Registered Agent:

CANADY, CHARLES
111 NE 170 ST
MIAMI, FL 33162

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: CHARLES CANADY 04/30/2004
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: CANADY, CARLENE
Address: 16400 NE 19TH AVE
City-St-Zip: NORTH MIAMI BEACH, FL 33162

Title: VD ( ) Delete
Name: CANADY, CHARLES
Address: 16400 NE 19TH AVE
City-St-Zip: NORTH MIAMI BEACH, FL 33162

Title: D ( ) Delete
Name: WILLTSHIRE, LESTER
Address: 16400 NE 19TH AVE
City-St-Zip: NORTH MIAMI BEACH, FL 33162

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: D (X) Change ( ) Addition
Name: WILTSHIRE, LESTER
Address: 16400 NE 19TH AVE
City-St-Zip: NORTH MIAMI BEACH, FL 33162

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: CARLENE CANADY PRES 04/30/2004
Electronic Signature of Signing Officer or Director Date