2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000006859

FILED Apr 20, 2011 Secretary of State

Entity Name: CENTRAL FLORIDA HUMAN SERVICES, INC.

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

1325 GEORGE JENKINS BLVD LAKELAND, FL 33815

Current Mailing Address: New Mailing Address:

P.O. BOX 1067

LAKELAND, FL 338021067 US

FEI Number: 59-3481836 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:

WELCH, J E 1325 GEORGE JENKINS BLVD. LAKELAND, FL 33815 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:

Title: D

Name: EANETT, ROBERT B M.D.

Address: 1033 NORTH PARKWAY FRONTAGE RD.

City-St-Zip: LAKELAND, FL 33813

Title: DVPS

Name: GARRETT, HOWARDENE Address: 1911 CHEROKEE TRAIL City-St-Zip: LAKELAND, FL 33803

Title: D

 Name:
 BOONE, KELLY

 Address:
 1029 EUCLID AVE

 City-St-Zip:
 LAKELAND, FL 33801

Title:

Name: FRAKER, WILLIAM

Address: 1001 CARPENTERS WAY APT. G-206

City-St-Zip: LAKELAND, FL 33809

Title: [

 Name:
 REYNOLDS, ALAN

 Address:
 3330 WINTERLAKE ROAD

 City-St-Zip:
 LAKELAND, FL 33803

Title: F

Name: SALE, ALLEN

Address: 309 S. TENNESSEE AVE City-St-Zip: LAKELAND, FL 33801

I hereby 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 all other like empowered.

SIGNATURE: ALLEN SALE P 04/20/2011