

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000000091

FILED
Mar 02, 2006
Secretary of State

Entity Name: SUNCOAST MENTAL HEALTH CENTER, INC.

Current Principal Place of Business:

2814 S US #1
D-4
FORT PIERCE, FL 34982 US

New Principal Place of Business:

Current Mailing Address:

2814 S US #1
D-4
FORT PIERCE, FL 34982 US

New Mailing Address:

FEI Number: 65-0789152 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

BRACKEN, JOHN W ED
2814 S US #1
FORT PIERCE, FL 34982 US

Name and Address of New Registered Agent:

LASETER, JAMES
2814 S US #1
D-4
FORT PIERCE, FL 34982 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: JAMES LASETER

03/02/2006

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PRES () Delete
Name: GLANVILLE, MAREE PRES
Address: 863 NE DAHOON TERRACE
City-St-Zip: PORT ST LUCIE, FL 34952 US

Title: OFFC () Delete
Name: ROBINSON, GEORGE OFFICER
Address: 3107 ANN ARBOR RD
City-St-Zip: PORT ST LUCIE, FL 34952 US

Title: TREA () Delete
Name: TRUCKENMILLER, ROBERT TREAS
Address: 50 SE KINDRED ST
City-St-Zip: STUART, FL 34994 US

Title: OFFC () Delete
Name: MCGILL, LAURA OFFICER
Address: 27TH AVE
City-St-Zip: VERO BEACH, FL 32960 US

Title: OFFC () Delete
Name: ART, CIASCA OFFICER
Address: 27TH AVE
City-St-Zip: VERO BEACH, FL 32960 US

Title: OFFC (X) Delete
Name: JOHN, MOORE OFFICER
Address: 2814 S US HWY 1, STE D4
City-St-Zip: FT PIERCE, FL 34982 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: GLANVILLE, MARIE
Address: 863 NE DAHOON TERR
City-St-Zip: JENSEN BEACH, FL 34957 US

Title: T (X) Change () Addition
Name: TRUCKENMILLER, ROBERT
Address: 1071 E 10TH ST
City-St-Zip: STUART, FL 34996

Title: S (X) Change () Addition
Name: MCGILL, LAURA
Address: 1990 25TH ST
City-St-Zip: VERO BEACH, FL 32960

Title: D (X) Change () Addition
Name: MOORE, JOHN
Address: 337 N 4TH ST
City-St-Zip: FORT PIERCE, FL 34950

Title: D (X) Change () Addition
Name: ART, CIASCA
Address: 1000 36TH ST
City-St-Zip: VERO BEACH, FL 32960

Title: () Change () Addition
Name:
Address:
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: MARIE GLANVILLE

P

03/02/2006

Electronic Signature of Signing Officer or Director

Date