

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000000398

FILED
Apr 27, 2006
Secretary of State

Entity Name: SOUTH COUNTY PEOPLE FOR LIFE, INC.

Current Principal Place of Business:

642 N AUBURN RD
VENICE, FL 34292

New Principal Place of Business:

Current Mailing Address:

642 N AUBURN RD
VENICE, FL 34292

New Mailing Address:

FEI Number: 65-0810978

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

THOMAS, PAUL
283 FAREHAM DR.
VENICE, FL 34293 US

Name and Address of New Registered Agent:

THOMAS, CAROLYN
283 FAREHAM DR.
VENICE, FL 34293 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: CAROLYN THOMAS

04/27/2006

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: DOLBY, DWIGHT L
Address: 642 N. AUBURN ROAD
City-St-Zip: VENICE, FL 34292

Title: D () Delete
Name: THOMAS, CAROLYN
Address: 283 FAREHAM DR.
City-St-Zip: VENICE, FL 34293

Title: T () Delete
Name: CHAPLIN, JENNIFER
Address: 1508 HIGHLAND ST.
City-St-Zip: NOKOMIS, FL 34275

Title: P/D () Delete
Name: FERREIRA, JOSEPH
Address: 1325 POPLAR AVE.
City-St-Zip: VENICE, FL 34292

Title: VP/D () Delete
Name: THOMAS, PAUL
Address: 283 FAREHAM DR.
City-St-Zip: VENICE, FL 34293

Title: S () Delete
Name: O'DONNELL, BARBARA
Address: 1680 THOMAS ST.
City-St-Zip: ENGLEWOOD, FL 34223

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

Title: VP (X) Change () Addition
Name: CAMPION, KATHY
Address: 1360 CAMBRIDGE DR.
City-St-Zip: VENICE, FL 34293

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: JENNIFER CHAPLIN

T

04/27/2006

Electronic Signature of Signing Officer or Director

Date