

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000001149

FILED
Jul 11, 2007
Secretary of State

Entity Name: PINEY GROVE HUMAN SERVICES CORPORATION, INC.

Current Principal Place of Business:

4699 W. OAKLAND PARK BLVD
FORT LAUDERDALE, FL 33313

New Principal Place of Business:

Current Mailing Address:

4699 W. OAKLAND PARK BLVD
FORT LAUDERDALE, FL 33313 US

New Mailing Address:

FEI Number: 65-0813429 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

ADAMS, GWENDOLYN
4699 W. OAKLAND PARK BLVD.
LAUDERDALE LAKES, FL 33313 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: P () Delete
Name: GIBBS, VONICE
Address: 4699 W. OAKLAND PARK BLVD.
City-St-Zip: LAUDERDALE LAKES, FL 33313

Title: VD () Delete
Name: CRAWFORD, CARL M
Address: 2737 NW 24TH AVENUE
City-St-Zip: FT. LAUDERDALE, FL 33311

Title: S () Delete
Name: ADAMS, GWENDOLYN
Address: 3340 NW 7TH COURT
City-St-Zip: FT. LAUDERDALE, FL 33311

Title: S () Delete
Name: CLARK, ANNIE ASST
Address: 920 NW 38TH AVENUE
City-St-Zip: FT. LAUDERDALE, FL 33311

Title: T () Delete
Name: ADAMS, GWENDOLYN
Address: 7497 NW 49TH PLACE
City-St-Zip: LAUDERHILL, FL 33319

Title: D () Delete
Name: BOWEN, DEBORAH
Address: 10340 NW 12 PL
City-St-Zip: PLANTATION, FL 33322

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
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City-St-Zip:

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

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

I hereby certify that the information supplied with this filing does not qualify 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: VONICE GIBBS

TREA

07/11/2007

Electronic Signature of Signing Officer or Director

Date