

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000001455

FILED
Jul 24, 2006
Secretary of State

Entity Name: ADOPTION SOURCE, INC.

Current Principal Place of Business:

6401 CONGRESS AV
205
BOCA RATON, FL 33487 US

New Principal Place of Business:

Current Mailing Address:

6401 CONGRESS AV
205
BOCA RATON, FL 33487 US

New Mailing Address:

FEI Number: 65-0876411 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:

SCOTT, JILL
6401 CONGRESS AV SUITE 205
BOCA RATON, FL 33487 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: PD () Delete
Name: SCOTT, JILL A
Address: 922 S. W. 36TH AVENUE
City-St-Zip: BOYNTON BEACH, FL 33435

Title: VP () Delete
Name: DOBBELAER, RITA N
Address: 829 CAMINO GARDENS LANE
City-St-Zip: BOCA RATON, FL 33432

Title: DIR () Delete
Name: KELLY, RICHARD
Address: 15 DEWEY AVENUE
City-St-Zip: AMITYVILLE, NY 11701

Title: SECY () Delete
Name: CORBIN, GEOFF
Address: 736 COURTENAY DRIVE NE
City-St-Zip: ATLANTA, GA 30306

Title: TRE () Delete
Name: RUFF, MARCI B
Address: 5 ISLAND PLACE
City-St-Zip: NEW CITY, NY 10956

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: SCOTT, JILL A
Address: 6292 D'ORSAY COURT
City-St-Zip: DELRAY BEACH, FL 33484

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:

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: JILL SCOTT

PD

07/24/2006

Electronic Signature of Signing Officer or Director

Date