2005 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED
Dec 08, 2005
Secretary of State

DOCUMENT# P01000114557

Entity Name: SEVEN HILLS CENTER, INC.

Current Principal Place of Business:

5556 LEGEND HILLS LN.
SPRING HILL, FL 34609

New Principal Place of Business:

P.O. BOX 11188
SPRING HILL, FL 34610

Current Mailing Address:

PO BOX 11188
SPRING HILL, FL 34610

New Mailing Address:

FEI Number: 59-3759720 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

AMOLI, BOUALI F
5556 LEGEND HILLS LN
SPRING HILL, FL 34609 US

Name and Address of New Registered Agent:

THE HOGAN LAW FIRM
20 SOUTH BROAD STREET
BROOKSVILLE, FL 34601 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: THOMAS S. HOGAN, JR. 12/08/2005
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: AMOLI, FREDERICK B
Address: 5046 CHAMPIONSHIP LANE
City-St-Zip: SPRING HILL, FL 34609

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPST (X) Change ( ) Addition
Name: HASHEMIAN, MICHAEL M DMD, MD
Address: P.O. BOX 11188
City-St-Zip: SPRING HILL, FL 34610

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MICHAEL M. HASHEMIAN, DMD, MD P 12/08/2005
Electronic Signature of Signing Officer or Director Date