2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000018638

Entity Name: PHC MANAGEMENT COMPANY

FILED Feb 13, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 10702 NORTH 46TH STREET TAMPA, FL 33617 **Current Mailing Address: New Mailing Address:** 10702 NORTH 46TH STREET TAMPA, FL 33617 FEI Number: 84-1634680 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: HALLUSKA, THOMAS R 7537 MELOGOLD CIRCLE LAND O LAKES, FL 346397414 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 Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: (X) Change () Addition HALLUSKA, THOMAS R HALLUSKA, THOMAS R Name: Name: 7537 MELOGOLD CIRCLE 7537 MELOGOLD CIRCLE Address: Address: City-St-Zip: LAND O LAKES, FL 346397414 City-St-Zip: LAND O LAKES, FL 346377414 () Delete Title: Title: (X) Change () Addition Name: BAKER, JEFFREY J Name: BAKER, JEFFREY J 28 LONG CREEK DR. 28 LONGCREEK DR Address: Address: EURNT HILLS, NY 12027 BURNT HILLS, NY 12027 City-St-Zip: City-St-Zip: () Delete Title: Title: () Change () Addition EUKOVICH, ROBERT J Name: Name: 2710 WEDGEWOOD DRIVE Address: Address: City-St-Zip: PLANT CITY, FL 33566 City-St-Zip: Title: () Delete Title: () Change () Addition SCHNEIDER, ROBERT R Name: Name: Address: 3021 FAIR OAKS AVENUE Address: City-St-Zip: TAMPA, FL 33611 City-St-Zip:

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: THOMAS R HALLUSKA CFO 02/13/2005