2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000062015

Entity Name: THREE SISTERS OF THE TREASURE COAST, INC.

FILED Jan 30, 2006 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
676 NE DIXIE HIGHWAY JENSEN BEACH, FL 34957	
Current Mailing Address:	New Mailing Address:
676 NE DIXIE HIGHWAY JENSEN BEACH, FL 34957	P.O. BOX 1664 JENSEN BEACH, FL 34958
FEI Number: 20-1013579 FEI Number Applied For ()	FEI Number Not Applicable () Certificate of Status Desired (X)
Name and Address of Current Registered Agent:	Name and Address of New Registered Agent:
JOHNSTON, NANCY L 1005 SUMNER AVENUE JENSEN BEACH, FL 34957 US	
The above named entity submits this statement for the in the State of Florida.	e purpose of changing its registered office or registered agent, or both,
SIGNATURE:	
Electronic Signature of Registered A	Agent Date
Election Campaign Financing Trust Fund Contribution ().	
OFFICERS AND DIRECTORS:	ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR

Title: Title: () Delete (X) Change () Addition JOHNSTON, NANCY L JOHNSTON, NANCY L Name: Name: 1005 SUMNER AVENUE 1005 SUMNER AVENUE Address: Address: City-St-Zip: JENSEN BEACH, FL 34957 City-St-Zip: JENSEN BEACH, FL 34957 Title: () Delete Title: (X) Change () Addition

JOHNSTON, LORETTA B JOHNSTON, LORETTA B Name: Name: Address: 509 S. CAROLINA DRIVE Address: 509 S. CAROLINA DRIVE STUART, FL 34994 STUART, FL 34994 City-St-Zip: City-St-Zip:

Title: Title: () Delete (X) Change () Addition Name: Name: GROSE, ELVA J

GROSE, ELVA J

Address: 1393 NW COCONUT POINT LANE Address: 1393 NW COCONUT POINT LANE

City-St-Zip: STUART, FL 34994 City-St-Zip: STUART, FL 34994

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

Ρ SIGNATURE: NANCY JOHNSTON 01/30/2006