2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000062015

FILED Jan 08, 2007 Secretary of State

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

Current Principal Place of Business:		New Principal Place of Business:		
	XIE HIGHWA` BEACH, FL 34			
Current Mailing Address:		New Mailing Address:		
P.O. BOX IENSEN E	1664 BEACH, FL 34	1958		
El Number	: 20-1013579	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()
Name and	Address of	Current Registered Agent:	Name and Address of	of New Registered Agent:
	ON, NANCY L INER AVENUE	≣		
ENSEN E	BEACH, FL 34	1957 US		
he above	BEACH, FL 34		purpose of changing its registere	ed office or registered agent, or both,
he above	BEACH, FL 34 named entity e of Florida.		purpose of changing its registere	ed office or registered agent, or both,
he above the Stat	BEACH, FL 34 named entity of Florida. RE:			ed office or registered agent, or both, Date
he above the Stat	BEACH, FL 34 named entity of Florida. RE: Electro	submits this statement for the		
The above n the Stati BIGNATU Election Ca	BEACH, FL 34 named entity of Florida. RE: Electro	submits this statement for the nic Signature of Registered Acting Trust Fund Contribution ().	gent	
The above the Stati SIGNATU	e named entity e of Florida. RE: Electro mpaign Financir S AND DIREC	submits this statement for the nic Signature of Registered Age Trust Fund Contribution (). CTORS:) Delete ANCY L R AVENUE	gent	Date
The above in the State SIGNATU Election Caron Ca	e named entity e of Florida. RE: Electro mpaign Financir S AND DIRECTO P (JOHNSTON, N 1005 SUMNER JENSEN BEACTO	submits this statement for the nic Signature of Registered Againg Trust Fund Contribution (). CTORS:) Delete ANCY L R AVENUE CH, FL 34957) Delete ORETTA B INA DRIVE	gent ADDITIONS/CHANG Title: Name: Address:	Date ES TO OFFICERS AND DIRECTOR

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.

SIGNATURE: NANCY L JOHNSTON PRES 01/08/2007