

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000044271

FILED
Feb 06, 2006
Secretary of State

Entity Name: ST. CHRISTOPHER'S ADMISSIONS CORP.

Current Principal Place of Business:

P.O. BOX 7038
NAPLES, FL 34101 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 7038
NAPLES, FL 34101 US

New Mailing Address:

FEI Number: 65-0919320

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

GERARDIN, CAROL CPA
4099 TAMIAMI TRAIL N.
#200
NAPLES, FL 34102 US

Name and Address of New Registered Agent:

LEONE, TRICIA
471 SOLL STREET
NAPLES, FL 34109 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: TRICIA LEONE

02/06/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: LEONE, PAUL
Address: P.O. BOX 7038
City-St-Zip: NAPLES, FL 34101 US

Title: S () Delete
Name: LEONE, TRICIA
Address: P.O. BOX 7038
City-St-Zip: NAPLES, FL 34101 US

Title: T () Delete
Name: SHAIKH, FIROZ
Address: P.O. BOX 7038
City-St-Zip: NAPLES, FL 34101 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

SIGNATURE: TRICIA LEONE

VP

02/06/2006

Electronic Signature of Signing Officer or Director

Date