


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 08, 2006 8:00 am
Secretary of State

05-08-2006 90288 027 ***150.00

DOCUMENT # G08070

1. Entity Name
PALM HARBOR CHRISTIAN COUNSELING CENTER OF TIMOTHY N. DALEY, P.A.



Principal Place of Business Mailing Address

248 ALT 19 SUITE C 248 ALT 19 SUITE C
 PALM HARBOR, FL 34683 US ~~SPRING~~
 PALM HARBOR, FL 34683 US

DO NOT WRITE IN THIS SPACE



01032006 No Chg-P CR2E034 (11/05)

4. FEI Number 59-2240728	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

DALEY, TIMOTHY N PHD
 248 ALT 19 SUITE C
 PALM HARBOR, FL 34683

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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD DALEY, TIMOTHY N 1430 WATERMILL CIRCLE TARRON, SPRINGS, FL 34688 7443 PURSLANE DR. TRINITY, FL 34655
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other living employees.

SIGNATURE:  04/27/06 (727) 656-4575
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #
 TIMOTHY N. DALEY, P.A.D., PRESIDENT