## 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N06000009703

FILED Aug 08, 2007 Secretary of State

Entity Name: ORANGE COUNTY COUNSELING ASSOCIATION INC.

Current Principal Place of Business: New Principal Place of Business:

4500 WEST COLUMBIA STREET 2900 UPPER PARK RD. ORLANDO, FL 32811 ORLANDO, FL 32814

Current Mailing Address: New Mailing Address:

4500 WEST COLUMBIA STREET
ORLANDO, FL 32811

2900 UPPER PARK RD
ORLANDO, FL 32814

FEI Number: FEI Number Applied For ( ) FEI Number Not Applicable (X) Certificate of Status Desired (X)

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

COLLINS, SEANTE K
4500 WEST COLUMBIA STREET
ORLANDO, FL 32811 US

MCGOWAN, MARY K
2900 UPPER PARK RD
ORLANDO, FL 32814 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: MARY MCGOWAN 08/08/2007

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

itle: P () Delete Title: P (X) Change () Addition

 Name:
 COLLINS, SEANTE K
 Name:
 MCGOWAN, MARY

 Address:
 4500 WEST COLUMBIA STREET
 Address:
 2900 UPPER PARK RD

City-St-Zip: ORLANDO, FL 32811 City-St-Zip: ORLANDO, FL 32814

Title: TRES ( ) Delete Title: PE (X) Change ( ) Addition Name: COOK, TERSECA A Name: BROOKES-ROMNEY, MERLYN

Address: 6100 OLEANDER DR. Address: 9055 NORTH LAKE PARK COMMUNITY SCHOOL

City-St-Zip: ORLANDO, FL 32807 City-St-Zip: ORLANDO, FL 32827

Title: SEC ( ) Delete Title: PP (X) Change ( ) Addition

Name:MILLIMAN, SUSANName:COLLINS, SEANTEAddress:1925 OCOEE CROWN POINT PARKWAYAddress:4500 WEST COLUMBIA ST

City-St-Zip: OCOEE, FL 34761 City-St-Zip: ORLANDO, FL 32811

I hereby certify that the information supplied with this filing does not qualify 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: SEANTE COLLINS PP 08/08/2007