

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000004710

FILED
Apr 14, 2009
Secretary of State

Entity Name: DISCOVERY COUNSELING OF ORLANDO, INC.

Current Principal Place of Business:

320 CROWN OAK CENTRE DRIVE
LONGWOOD, FL 32750 US

New Principal Place of Business:

Current Mailing Address:

575 FIRST CAPE CORAL DRIVE
WINTER GARDEN, FL 34787 US

New Mailing Address:

FEI Number: 26-2604602

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BLANCHARD, ANDREW P
575 FIRST CAPE CORAL DRIVE
WINTER GARDEN, FL 34787 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: BLANCHARD, DARBY J
Address: 575 FIRST CAPE CORAL DRIVE
City-St-Zip: WINTER GARDEN, FL 34787 US

Title: VP () Delete
Name: BLANCHARD, ANDREW P
Address: 575 FIRST CAPE CORAL DRIVE
City-St-Zip: WINTER GARDEN, FL 34787 US

Title: ST () Delete
Name: FITZGERALD, MEREDITH
Address: 575 FIRST CAPE CORAL DRIVE
City-St-Zip: WINTER GARDEN, FL 34787 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 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: ANDREW P BLANCHARD

VP

04/14/2009

Electronic Signature of Signing Officer or Director

_____ Date