## 2005 FOR PROFIT CORPORATION

## **FILED** Mar 18, 2005 08:00 AM

ANNUAL REPORT				Carrada - C C4-4		
DOCUMENT # P02000013563  1. Entity Name MARGO BURCHIM, M.A., LMHC, P.A.					Seci	retary of State
Principal Place 2477 STICKN SUITE 115-B SARASOTA, F	EY POINT RD	Mailing Address 2477 STICKNEY POINT RD SUITE 115-B SARASOTA, FL 34231				
DO NOT WRITE IN THIS SPA			CE	03082005 No Chg-P CR2E034 (10/03)  4. FEI Number		
6. Name and Address of Current Registered Agent						
BRADFORD, GABRIEL 2477 STICKNEY POINT RD 115-B SARASOTA, FL 34231				-	NOT WF HIS SPA	
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  Signature, typod or printed name of registered agent and tide if applicable (NOTE Registered Agent signature required when reinstating)  OATE						
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00		Election Campaign Fina     Trust Fund Contribution.		.00 May Be		
10.	OFFICERS AND D	RECTORS				
TITLE NAME STREET ADDRESS CITY - ST - ZIP TITLE NAME STREET ADDRESS	DPTS MARGARET-BURCHIM, MARY 2477 STICKNEY POINT RD, SUITI SARASOTA, FL 34231	Ē 115-B			U000002 03/18/05-8	68937 10064-002 150.00
CITY-ST-ZIP  TITLE NAME STREET ADDRESS CITY-ST-ZIP  TITLE NAME STREET ADDRESS CITY-ST-ZIP			DO NOT WRITE IN THIS SPACE			
TITLE NAME						

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 like empowered.

SIGNATURE:

\*\*SIGNATURE\*\*

\*\*SIGNATURE\*\*

\*\*SIGNATURE\*\*

\*\*SIGNATURE\*\*

\*\*Date\*\*

\*\*Date\*

CITY-ST-ZIP TITLE NAME STREET ADDRESS