08-13-2004 90147 001 ***150.00
08-13-2004 90147 002 *****8.75
P02000099805

FILED
04 SEP -2 AM 10:17
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P02000099805

1. Entity Name
~~STEVE~~ GODFREY, LMHC, INC.
Stephen

Principal Place of Business
~~3880 SOUTH WASHINGTON AVE~~ (c)
~~SUITE 240 AND 241~~ 1313 S,
TITUSVILLE, FL 32780 Washington Ave
Titusville FlA 32780

Mailing Address
~~3880 SOUTH WASHINGTON AVE.~~ 1313 (c) S. Washington Ave
~~SUITE 240 AND 241~~
TITUSVILLE, FL 32780

2. Principal Place of Business
Suite, Apt. #, etc.
City & State
Zip
Country

3. Mailing Address
Suite, Apt. #, etc.
City & State
Zip
Country

08042004 Chg-P CR2E034 (10/03)

4. FEI Number ~~APPLIED FOR~~ 20 - 1237216 | Applied For | Not Applicable

5. Certificate of Status Desired ☑ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
FLORIDA INCORPORATION STATION, LLC
420 PARK AVE 19 -
TALLAHASSEE, FL 32301
Same →

7. Name and Address of New Registered Agent
Name: Fla. Inc. Station. LLC Inc.
Street Address (P.O. Box Number is Not Acceptable): 3250 Park Station Ave
Tallahassee FlA
City ~~TITUSVILLE~~ FL Zip Code 32301

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
Due by September 8, 2004

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

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

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D GODFREY, ~~STEVE~~ Stephen ~~240-241~~ ~~3880 SOUTH WASHINGTON AVE STE 241-242~~ ~~TITUSVILLE, FL 32780~~ ☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	1313 (C) S. Washington Ave Titusville, FlA 32780 ☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
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TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition

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] LMHC Inc 8-11-04 321 480 4191
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR | Date | Daytime Phone #

Mr Stephen Godfrey, LMHC, INC.
1313 (C) S. Washington Ave
Titusville FlA 32780