2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P09000009703

FILED Apr 04, 2011 Secretary of State

Entity Name: A BREVARD CENTER FOR FAMILY COUNSELING, INC.

VIERA, FL 32955 US Current Mailing Address: New Mailing Address: 5115 PINOT STREET	Current Principal Place of Business:		New Principal Place of Business:		
5115 PINOT STREET	5115 PINOT STREET VIERA, FL 32955 US				
5115 PINOT STREET VIERA, FL 32955 US	Current Mailing Address	::	New Mailing Address:		
FEI Number: 26-4207376 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()	FEI Number: 26-4207376	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:	Name and Address of Current Registered Agent: N		Name and Address of	Name and Address of New Registered Agent:	
SADKOWSKI, ELAINE 5115 PINOT STREET VIERA, FL 32955 US	5115 PINOT STREET				
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:	SIGNATURE:				
Electronic Signature of Registered Agent Date	Electronic	c Signature of Registered Ager	nt	Date	

OFFICERS AND DIRECTORS:

Title: DPST

Name: SADKOWSKI, ELAINE Address: 5115 PINOT STREET City-St-Zip: VIERA, FL 32955 US

I hereby 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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: ELAINE SADKOWSKI LCSW 04/04/2011