

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000072612

FILED  
Apr 22, 2009  
Secretary of State

Entity Name: MERIDIAN COUNSELING CENTER, INC.

**Current Principal Place of Business:**

38108 MERIDIAN AVE  
DADE CITY, FL 33525

**New Principal Place of Business:**

**Current Mailing Address:**

P O BOX 337  
DADE CITY, FL 335260337

**New Mailing Address:**

FEI Number: 59-3526805

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

PAYNE, GLORIA L  
37233 CHURCH AVE  
6611 BOYETTE ROAD  
DADE CITY, FL 33525 US

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

PAYNE, GLORIA L  
37233 CHURCH AVE  
DADE CITY, FL 33525 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: \_\_\_\_\_

Electronic Signature of Registered Agent

04/22/2009

Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PSTD ( ) Delete  
Name: PAYNE, GLORIA L  
Address: 37233 CHURCH AVE  
City-St-Zip: DADE CITY, FL 33525

Title: VD ( ) Delete  
Name: CONNELLY, JON  
Address: 4286 W MAIN ST  
City-St-Zip: JUPITER, FL 33477

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

SIGNATURE: GLORIA L. PAYNE

Electronic Signature of Signing Officer or Director

PSTD

04/22/2009

Date