

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 12, 2006 8:00 am
Secretary of State

04-12-2006 90098 008 ****70.00

DOCUMENT # 726520

1. Entity Name
 THE GUIDANCE CLINIC OF THE MIDDLE KEYS, INC.



Principal Place of Business
 3000 41ST STREET OCEAN
 MARATHON, FL 33050

Mailing Address
 3000 41ST STREET OCEAN
 MARATHON, FL 33050

50010969



2. Principal Place of Business		3. Mailing Address		03202006 Chg-NP CR2E037 (11/05)	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		4. FEI Number 59-1458324	
City & State		City & State		Applied For Not Applicable	
Zip	Country	Zip	Country	5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
RICE DAVID P PH.D 3000 41ST STREET OCEAN MARATHON, FL 33050			Name		
			Street Address (P.O. Box Number is Not Acceptable)		
			City		
			FL Zip Code		

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)

**Filing Fee is \$61.25
 Due by May 1, 2006**

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

**Make check payable to
 Florida Department of State**

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CD MAPES, LYNN 57723 MORTON ST. MARATHON, FL 33050 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 345 14th ST KEY COLONY BEACH FL 33051
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D PUTO, MICHAEL 700 89TH STREET OCEAN MARATHON, FL <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD SIMPSON, GEORGE 57443 GOODLEY ST. MARATHON, FL <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D FREEMAN, BATEMAN 1334 MARLIN DRIVE MARATHON, FL <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D RAMSEY, COL. RICK 5525 COLLEGE RD. KEY WEST, FL 33040 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	T/D <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D PUTO, MICHAEL 700 89TH STREET MARATHON, FL 33050 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

David P. Rice

3/23/06

Date

305-743-2034

Daytime Phone #

ATTACHMENT
50010969

Attachment to 726520

Chairman/Director
Lynn C. Mapes
345 13th Street
Key Colony Beach, FL 33051

Vice Chairman/Director
Marjorie Mearns
400 70th Street, Gulf
Marathon, FL 33050

Secretary/Director
George W. Simpson
57443 Goodley Street
Marathon, FL 33050

Treasurer/Director
Col. Rick Ramsey
5525 College Road
Key West, FL 33040

Director
Richard Steinberg
900 Grier Drive
Las Vegas, NV 89119

Director
Mary Cassinger
2950 S. Industrial Road
Las Vegas, NV 89109

Director
Jim Wadhams
3773 Howard Hughes Pkwy, 3rd Floor South
Las Vegas, NV 89109

Director
Tom Walsh
180 28th Avenue North
St. Petersburg, FL 33704

Director
Adam Silverman
2800 Ponce de Leon Blvd., Suite 1125
Coral Gables, FL 33134