
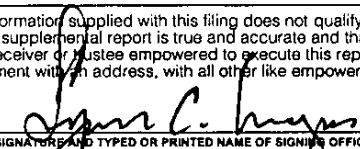


**2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Mar 03, 2008 8:00 am**  
**Secretary of State**

03-03-2008 90190 027 \*\*\*\*70.00

<b>DOCUMENT # 726520</b>			
1. Entity Name THE GUIDANCE CLINIC OF THE MIDDLE KEYS, INC.			
Principal Place of Business 3000 41ST STREET OCEAN MARATHON, FL 33050		Mailing Address 900 GRIER DRIVE LAS VEGAS, NV 89119	
2. Principal Place of Business - No P.O. Box #		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country
4. FEI Number 59-1458324		Applied For Not Applicable	
5. Certificate of Status Desired		<input checked="" type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	
6. Name and Address of Current Registered Agent		7. Name and Address of New Registered Agent	
BUSINESS FILINGS INCORPORATED 1203 GOVERNORS SQUARE BLVD. SUITE 101 TALLAHASSEE, FL 32301-2960		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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>			
<b>Filing Fee is \$61.25</b> <b>Due by May 1, 2008</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> 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	CD <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MAPES, LYNN	NAME	
STREET ADDRESS	345 14TH ST	STREET ADDRESS	
CITY-ST-ZIP	KEY COLONY BEACH, FL 33051	CITY-ST-ZIP	
TITLE	S <input checked="" type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SIMPSON, GEORGE	NAME	
STREET ADDRESS	57443 GOODLEY ST.	STREET ADDRESS	
CITY-ST-ZIP	MARATHON, FL	CITY-ST-ZIP	
TITLE	TD <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	RAMSEY, COL. RICK	NAME	
STREET ADDRESS	5525 COLLEGE RD.	STREET ADDRESS	
CITY-ST-ZIP	KEY WEST, FL 33040	CITY-ST-ZIP	
TITLE	VC <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MEARNS, MARJORIE	NAME	
STREET ADDRESS	400 70TH STREET, GULF	STREET ADDRESS	
CITY-ST-ZIP	MARATHON, FL 33050	CITY-ST-ZIP	
TITLE	P <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	STEINBERG, RICHARD	NAME	
STREET ADDRESS	900 GRIER DR	STREET ADDRESS	
CITY-ST-ZIP	LAS VEGAS, NV 89119	CITY-ST-ZIP	
TITLE	D <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	WALSH, THOMAS	NAME	
STREET ADDRESS	180 28TH AVE. N.	STREET ADDRESS	
CITY-ST-ZIP	SAINT PETERSBURG, FL 33704	CITY-ST-ZIP	
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: 		Date: 2/26/08	Daytime Phone #: 305-434-9000
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			

ATTACHMENT 40036498  
# 726520

Attachment to 726520

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

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

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

President/Director  
Richard Steinberg  
900 Grier Drive  
Las Vegas, NV 89119

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

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

Director  
Tom Walsh  
180 28<sup>th</sup> Avenue North  
St. Petersburg, FL 33704

Director  
Peter Chapman  
10065 Overseas Highway  
Marathon, FL 33050

Director  
Luis Sala  
6301 Gulf of Mexico Boulevard  
Marathon, FL 33050