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NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B Mortham

Secretary of State
DIVISION OF CORPORATIONS

1996

DOCUMENT # 713032

(1)

GHI E COUNTY GUIDANCE CLINIC, INC.

Malan Address								
Principal Place o	of Business	Mailing Address			[122 [1] 1838) 11884 (144 84144 1414)	1101 01011 0101		***************************************
311 WILLIAMS	AVE. FL 32456	311 WILLIAMS AVE. PORT ST JOE FL 32456						
					 Date Incorporated or Qualified 07/06/1967 		05/01/1995	
2. Principal Plac	ce of Business	2a. Mailing Address			4. FEI Number 59-1565514		 	pplied For ot Applicab
Suite, Apt. #,	ato.	Suite, Apt. #, etc.						Additional
Suite, Apr. #,	, 816.	27			5. Certificate of Status Desired			equired
City & State		City & State			6. Election Campaign Financing			May Be
		28	Country		Trust Fund Contribution 8. This corporation has liability for i			to Fees
Zip I	Country	Ž¢i 29	Country 30			Yes 🔲		199.032,
	25 9. Name and Address of Curre				10. Name and Address of New R	legistered A	Agent	
			81 N	ame				
RICHARDS	SON, W. A		82 8	treet Address	.(P.O. Box Number is Not Acceptab	ole)		
	CLELLAN AVENUE							
	. JOE FL 32456		83					
			84 0	ity		FL	85 Zip	Code
or registere familiar with	o the provisions of Sections 617.05t ad agent, or both, in the State of Flo in, and accept the obligations of Se	ction 617.0503, Florida Statuti	ized by the corpora es.	tion s board c	or unectors. Thereby accords the appe		-16199	
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SIGNATURE: W. A QUILLE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

April 16, 1996
Date: Phone #

CR2E037 (12/95)