2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 23, 2004
Secretary of State

DOCUMENT# 717744

Entity Name: SEMINOLE COMMUNITY MENTAL HEALTH CENTER, INC.

Current Principal Place of Business:

237 FERNWOOD BLVD
FERN PARK, FL 32730 US

New Principal Place of Business:

Current Mailing Address:

237 FERNWOOD BLVD
FERN PARK, FL 32730 US

New Mailing Address:

FEI Number: 59-1304471 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

AGC CO.
200 S. ORANGE AVE
STE 2300
ORLANDO, FL 32804

Name and Address of New Registered Agent:

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 — Date

OFFICERS AND DIRECTORS:

Title:	P	( ) Delete
Name:	SNEED, MARY	
Address:	28 W CENTRAL BLVD	
City-St-Zip:	ORLANDO, FL 32801	
Title:	VP	( ) Delete
Name:	GREGORY, LINDA	
Address:	130 GARFIELD RD	
City-St-Zip:	ENTERPIRSE, FL 32725	
Title:	VPD	( ) Delete
Name:	SNEED, MARY	
Address:	28 W. CENTRAL BLVD	
City-St-Zip:	ORLANDO, FL 32801	
Title:	D	( ) Delete
Name:	CONRAD, CROSS	
Address:	2101 HIBBARD TRAIL	
City-St-Zip:	CHULUOTA, FL 32766	
Title:	D	( ) Delete
Name:	NEWSOME, WES	
Address:	545 SUNRISE DR	
City-St-Zip:	CASSELBERRY, FL 32707	
Title:	O	( ) Delete
Name:	DRISKELL, DEBBIE	
Address:	251 FAWSETT ROAD WEST	
City-St-Zip:	WINTER PARK, FL 32789	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:	SD	(X) Change ( ) Addition
Name:	TERAMAE, GARY	
Address:	9405 S HWY 17-92	
City-St-Zip:	MAITLAND, FL 32751	
Title:	TD	(X) Change ( ) Addition
Name:	REICHERT, JOHN	
Address:	400 E. LAKE MARY BLVD	
City-St-Zip:	SANFORD, FL 32773	
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 for the exemption stated in Section 119.07(3)(i), 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DEBBIE DRISKELL O 03/23/2004

Electronic Signature of Signing Officer or Director — Date

DEBBIE DRISKELL, O
237 FERNWOOD BLVD
FERN PARK, FLORIDA 32730

TONY TIZZIO, D
809 OSCEOLA TRAIL
CASSELBERRY, FLORIDA 32707

JOHN SEMBER, D
1239 WOODRIDGE COURT
ALTAMONTE SPRINGS, FL 32714

DONALD RUFO, D
100 BUSH BLVD
SANFORD, FLORIDA 32773

FRANK MARTZ, D
2670 MILLS CREEK ROAD
CHULUOTA, FLORIDA 32766-9269

NEILL BEAVERS, D
284 E LONG CREEK COVE
LONGWOOD, FLORIDA 32750

MANUEL ACEVEDO, D
116 N. PARK AVENUE
SANFORD, FLORIDA 32771