

**2010 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT****FILED**  
**Sep 27, 2010**  
**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 (X)****Name and Address of Current Registered Agent:**CUDDLHY, MADONNA  
1200 SOUTH PINE ISLAND ROAD  
STE 2300  
PLANTATION, FL 33324 US**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: C  
Name: MACDIARMID, MALCOLM  
Address: 1723 GOLFSIDE DRIVE  
City-St-Zip: WINTER PARK, FL 32792

Title: S  
Name: FLORIO, KAREN  
Address: 652 MAGNOLIA DRIVE  
City-St-Zip: ALTAMONTE SPRINGS, FL 32703

Title: T  
Name: GREGORY, LINDA  
Address: 10240 HOOD COURT  
City-St-Zip: JACKSONVILLE, FL 32257

Title: VC  
Name: SEMBER, JOHN  
Address: 1239 WOODRIDGE COURT  
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

Title: D  
Name: BROWN, RICK  
Address: 211 NADINA TERRACE  
City-St-Zip: WINTER SPRINGS, FL 32708

Title: O  
Name: BERKO, JIM  
Address: 1814 CROWLEY CIRCLE  
City-St-Zip: LONGWOOD, FL 32779

I hereby 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 all other like empowered.

SIGNATURE: JIM BERKO

O

09/27/2010

Electronic Signature of Signing Officer or Director

Date