

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 720934

FILED  
Jul 29, 2011  
Secretary of State

**Entity Name:** FLORIDA COUNSELING ASSOCIATION, INC.

**Current Principal Place of Business:**

342 MINOLA DRIVE  
MIAMI SPRINGS, FL 33166 US

**New Principal Place of Business:**

1260 PALMETTO AVENUE  
SUITE 3  
WINTER PARK, FL 32789 US

**Current Mailing Address:**

342 MINOLA DRIVE  
MIAMI SPRINGS, FL 33166 US

**New Mailing Address:**

P. O. BOX 300457  
FERN PARK, FL 32730 US

**FEI Number:** 23-7294210

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

HERTCH, CANDY  
342 MINOLA DRIVE  
MIAMI SPRINGS, FL 33166 US

**Name and Address of New Registered Agent:**

HERTSCH, CARMEN  
342 MINOLA DRIVE  
MIAMI SPRINGS, FL 33166 US

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: CANDY HERTSCH

07/29/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: DP  
Name: VANDERBLEEK, LINDA  
Address: 6724 NORTH US 1  
City-St-Zip: MIMS, FL 32754 US

Title: DP  
Name: ARBUCKLE, SUSAN  
Address: 1060 SHERRINGTON ROAD  
City-St-Zip: ORLANDO, FL 32804 US

Title: DP  
Name: THOMPSON, LIZ  
Address: 85 HICKORY LOOP  
City-St-Zip: OCALA, FL 34472 US

Title: DP  
Name: ROACH, LEILA  
Address: 603 SWEETWATER COVE BLVD. SOUTH  
City-St-Zip: LONGWOOD, FL 32779 US

Title: T  
Name: BROWN, MYRA  
Address: 3301 NW 47 TERRACE / APT 417  
City-St-Zip: LAUDERDALE LAKE, FL 33319

Title: T  
Name: MILSTEAD, ROBERT  
Address: 4044 TENITA DRIVE  
City-St-Zip: WINTER PARK, FL 32792

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: DEBRA L. MIKOLOWSKI

OM

07/29/2011

Electronic Signature of Signing Officer or Director

Date