

**2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED  
May 05, 2004  
Secretary of State**

DOCUMENT# 725515

Entity Name: FLORIDA ASSOCIATION FOR MARRIAGE & FAMILY THERAPY, INC.

**Current Principal Place of Business:**

3015 SHANNON LAKES NORTH  
SUITE 303  
TALLAHASSEE, FL 32309 US

**New Principal Place of Business:**

860 EAST PARK AVE  
TALLAHASSEE, FL 32301 US

**Current Mailing Address:**

3015 SHANNON LAKES NORTH  
SUITE 303  
TALLAHASSEE, FL 32309 US

**New Mailing Address:**

860 EAST PARK AVE  
TALLAHASSEE, FL 32301 US

FEI Number: 59-2998898      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

GLASS, STEVE  
3015 SHANNON LAKES NORTH  
SUITE 303  
TALLAHASSEE, FL 32309 US

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

BARLOW, LARRY  
860 EAST PARK AVE  
TALLAHASSEE, FL 32301 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: LARRY O. BARLOW      05/05/2004  
\_\_\_\_\_  
Electronic Signature of Registered Agent      Date

**OFFICERS AND DIRECTORS:**

Title: D      ( ) Delete  
Name: LEGARE, NOREN  
Address: 860 EAST PARK AVE.  
City-St-Zip: TALLAHASSEE, FL 32301

Title: D      ( ) Delete  
Name: KAMINSKY, SILVIA  
Address: 5900 SW 73 ST., #105  
City-St-Zip: MIAMI, FL 33143

Title: P      ( ) Delete  
Name: HATCHER, GORDAN  
Address: 106 E CHURCH STREET  
City-St-Zip: ORLANDO, FL 32801

Title: ED      ( ) Delete  
Name: GLASS, STEVE  
Address: 3370 CAPITAL CIRCLE NE, SUITE D-2  
City-St-Zip: TALLAHASSEE, FL 32308

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: D      (X) Change ( ) Addition  
Name: BOYD, TOMMIE  
Address: 3301 COLLEGE AVE  
City-St-Zip: FT LAUDERDALE, FL 33314

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ED      (X) Change ( ) Addition  
Name: BARLOW, LARRY  
Address: 860 EAST PARK AVE  
City-St-Zip: TALLAHASSEE, FL 32301

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: LARRY O BARLOW      ED      05/05/2004  
\_\_\_\_\_  
Electronic Signature of Signing Officer or Director      Date