

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 743303

FILED
Aug 29, 2008
Secretary of State

Entity Name: NETWORK OF CHRISTIAN COUNSELING CENTERS, INC.

Current Principal Place of Business:

301 58TH STREET SO.
ST PETERSBURG, FL 33707 US

New Principal Place of Business:

467 FIRST AVENUE NORTH
ST PETERSBURG, FL 33701 US

Current Mailing Address:

P.O. BOX 710
ST. PETERSBURG, FL 33731

New Mailing Address:

467 FIRST AVENUE NORTH
ST PETERSBURG, FL 33701 US

FEI Number: 59-1867563 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

WOOD, WENDY
6298 BURLINGTON AVE N
SAINT PETERSBURG, FL 33710 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: P () Delete
Name: MCEWEN, DAVID
Address: 1019 40TH AVE N
City-St-Zip: SAINT PETERSBURG, FL 33703

Title: PP () Delete
Name: RUTLAND, SCOTT CLU CHFC
Address: 700 CTRL AVE 300
City-St-Zip: SAINT PETERSBURG, FL 33701

Title: S () Delete
Name: SCOTT, DANA
Address: 4673 ALISA CIR
City-St-Zip: SAINT PETERSBURG, FL 33703

Title: MAL (X) Delete
Name: MARTENS, ROLAND
Address: 83581 33RD AVE N
City-St-Zip: SAINT PETERSBURG, FL 33710

Title: T (X) Delete
Name: WOHLWEND, ALLEN
Address: 3160 WALNUT ST NE
City-St-Zip: SAINT PETERSBURG, FL 33704

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: MCEWEN, DAVID
Address: 467 FIRST AVENUE NORTH
City-St-Zip: SAINT PETERSBURG, FL 33701

Title: T (X) Change () Addition
Name: BOWMAN, LARRY
Address: 467 FIRST AVENUE NORTH
City-St-Zip: SAINT PETERSBURG, FL 33701

Title: D (X) Change () Addition
Name: WOOD, WENDY
Address: 467 FIRST AVENUE NORTH
City-St-Zip: SAINT PETERSBURG, FL 33701

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 exemption stated in Chapter 119, 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: WENDY WOOD

D

08/29/2008

Electronic Signature of Signing Officer or Director

Date