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CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Morthom
Secretary of State
DIVISION OF CORPORATIONS

FILED

95 MAY 18 AM 9:59

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 759521 (8)

1. Corporation Name

ASSOCIATION FOR HOLISTIC COUNSELORS, INC.

Principal Place of Business

Mailing Address

2000 SEMINOLE BLVD.
21. BOX 186
LARGO FL 34649
US

11750 6TH ST., E.
TREASURE ISLAND FL 33708
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

08/07/1981

3a. Date of Last Report

08/09/1994

4. FEI Number

59-2233628

Applied For

Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐ \$5.00 May Be
Added to Fees

7. Nonprofit with IRS 501(c)(3)
Tax Exempt Status

☐ \$68.75 Supplemental
Fee Not Required

8. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes

☐ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

MACDONALD, RONALD
11750-6TH ST.,EAST
TREASURE ISLAND FL 33708

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85

Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and fee if applicable

(NOTE: Registered Agent signature required when registering)

DATE

12. OFFICERS AND DIRECTORS

TITLE

PD

NAME

MACDONALD, DOROTHY D.

STREET ADDRESS

11750-6TH ST.,EAST

CITY - ST - ZIP

TREASURE ISLAND FL

TITLE

STD

NAME

HARRIMAN, JEANNE

STREET ADDRESS

11750-6TH STREET, EAST

CITY - ST - ZIP

TREASURE ISLAND FL

TITLE

D

NAME

HODGES, PAMELA

STREET ADDRESS

P.O. BOX 1042

CITY - ST - ZIP

IDAHO SPGS. CO

TITLE

D

NAME

OBRENGON, ROSALIE

STREET ADDRESS

2135 22ND AVE N

CITY - ST - ZIP

ST.PETERSBURG FL

TITLE

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