

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 760262

FILED
Jan 20, 2009
Secretary of State

Entity Name: PERSONAL ENRICHMENT THROUGH MENTAL HEALTH SERVICES, INC.

Current Principal Place of Business:

11254 58 ST.NO.
PINELLAS PARK, FL 337822213 US

New Principal Place of Business:

Current Mailing Address:

11254 58 ST.NO.
PINELLAS PARK, FL 337822213 US

New Mailing Address:

FEI Number: 59-3153549 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

WEDEKIND, THOMAS C E.D.
11254 58 ST.NO.
PINELLAS PARK, FL 337822213 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: PD () Delete
Name: REMMING, KEN
Address: 11254 58TH ST. NO.
City-St-Zip: PINELLAS PARK, FL 337852221 US

Title: VPD () Delete
Name: KNAUS, RON
Address: 11254 58TH ST. NO.
City-St-Zip: PINELLAS PARK, LF 337822213 US

Title: SD () Delete
Name: GUETZLOE, ELEANOR
Address: 11254 58TH ST. NO.
City-St-Zip: SAINT PETERSBURG, FL 337822213 US

Title: TD () Delete
Name: BUBY, DAVID
Address: 11254 58TH ST. NO.
City-St-Zip: PINELLAS PARK, FL 337822213 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

Title: TD (X) Change () Addition
Name: STONE, LYNN
Address: 11254 58TH ST. NO.
City-St-Zip: PINELLAS PARK, FL 337822213 US

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: GERALD F. WENNLUND

COO

01/20/2009

Electronic Signature of Signing Officer or Director

Date