# F97000006136

ATTORNEY AT LAW

1701 S. E. FORT KING STREET OCALA, FLORIDA 34471 TELEPHONE (352) 622-4116 FAX (352) 622-1232

November 4, 1997

Florida Department of State Division of Corporations P. O. Box 6327 Tallahassee, Florida 32314

600002338736--2 -11/05/97--01061--001 \*\*\*\*\*\*78.75 \*\*\*\*\*\*78.75

W97-25178

RE: Act II Counseling Services, Inc.

#### Gentlemen:

In connection with the above corporation, you will please find enclosed the following documents:

- Application by Foreign Corporation for Authorization to Transact Business in Florida.
- Certificate of good stating issued by State Department of Assessments and Taxation, State of Maryland.
- 3. Check in the amount of \$78.75 representing \$70.00 registration fee and \$8.75 for a certificate of status.
- 4. Transmittal letter completed on behalf of Act II Counseling Services, Inc.

Sincerely,

Mary B. Steddom

MBS:lr Enclosure mtn

11/20

#### TRANSMITTAL LETTER

•	fication/Tax Lien Section ion of Corporations									
SUBJECT:	ACT II Counseling ServicES, INC		•							
(Name of corporation - must include suffix)										
Dear Sir or Madam:										
The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida", "Certificate of Existence", and check are submitted to register the above referenced foreign corporation to transact business in Florida.										
Please return	all correspondence concerning this matter to the following:									
	PRICE P. ODEN									
(Name of Person)										
	ACT II Counseling Services INC.									
	(Finn/Company)	97	SEG							
	(Firm/Company)  50.D. N.E. 49 <sup>th</sup> STREET  (Address)									
(Address) 2 97										
	OCALA FLorida 34471	) AM	2007 2007 2007							
(City/State/Zip)										
OCALA FLorida 34471  (City/State/Zip)  Should you need to call someone concerning this matter, please call:  PRICE ODEN  at (352) 620-8885										
(Name of Person) (Area Code & Daytime Telephone Number)										

#### **COURIER ADDRESS:**

Qualification/Tax Lien Section Division of Corporations 409 E. Gaines St. Tallahassee, FL 32399

#### MAILING ADDRESS:

Qualification/Tax Lien Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314



#### FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

November 5, 1997

MARY B STEDDOM, P.A. 1701 S.E. FORT KING STREET OCALA, FL 34471

SUBJECT: ACT II COUNSELING SERVICES INC.

Ref. Number: W97000025178

We have received your document for ACT II COUNSELING SERVICES INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

A brief description of the entity's nature of business must be included in the document.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6097.

Michael Mays Document Specialist

Letter Number: 897A00053615



### FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

November 12, 1997

MARY B STEDDOM, P.A. 1701 S.E. FORT KING STREET OCALA, FL 34471

SUBJECT: ACT II COUNSELING SERVICES INC.

Ref. Number: W97000025178

We have received your document for ACT II COUNSELING SERVICES INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

Their is an additional page of the application to be completed which consist of the officers. I have enclosed that page for you to complete sign an return.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please cal (850) 487-6097.

Michael Mays Document Specialist

Letter Number: 197A00054284

SECRETARY OF STATE DIVISION OF CORPORATIONS

### APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES. THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA Counseling SERVICES INC. (Name of corporation; must include the word "INCORPORATED", "COMPANY", "CORPORATION" or words or abbreviations of like import in language as will clearly indicate that it is a corporation instead of a natural person or partnership if not so contained in the name at present.) 2. Maryland

(State or country under the law of which it is incorporated)

3. 52-1917-107

(FEI number, if applicable) 4. JAN 5, 1995

(Date of incorporation)

5. GETC PETUAL

(Duration: Year corp. will cease to exist or "perpetual") 6. JULY 1, 1997

(Date first transacted business in Florida.) (SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.) OCALA FL 34479
(Current mailing address) Offer out-patient addiction counseling and on-site residential non-medical non-treatment halfway housing for recovering substant abusers seeking voluntary admission. (Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida) 9. Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptable) Name: Price ODEN - ALT II Counseling Services inc Office Address: 50-D N.E 49th STREET OCAIA , Florida, 34479 10. Registered agent's acceptance: Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent. (Registered agent's signature)

12. Names and addresses of officers and/or directors: (Street address ONLY - P.O. Box NOT acceptable)

of which it is incorporated.

11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law

A. DIREC	CTORS (Street address only - P.O. Box NOT acceptate	ole)						
Chairman:	Price Oden	- · · · · · · · · · · · · · · · · · · ·	****		-	<del></del>		
Address: _	50-D.N.E. 49th Street			<del> </del>		-		
	Ocala, Florida 34479			· · · · · · · · · · · · · · · · · · ·				
Vice Chair	man: Richard Bagster-Collins							
Address:	107 Tamarisk Court							
_	Greenbelt, Maryland 20770							
Director:	Donna Lund					<u> </u>		
Address:	14950 Belle Ami Drive							
	Laurel, Maryland 20707					<del></del>		
Director:				· · · · · · · · · · · · · · · · · · ·		<u></u> .		
Address:				<u> </u>				
B. OFFI	CERS (Street address only - P.O. Box NOT acce	ptable)			9	DIVI S		
President:	Price Oden	——————————————————————————————————————	<del> </del>		7 10	<u>-855</u> 		
Address:	50-D N.E. 49th Street, 63		· · · · · ·		V 20	- <del>SE</del> T-		
	Ocala, Florida 34479				<u>⇒</u>	- <del>840</del> -840 -840		
Vice Presi	ident: Richard Bagster-Collins		<u> </u>		9:			
Address:	107 Tamarisk Court				<u> </u>	1045 1		
	Greenbelt, Maryland 20770							
Secretary:	Donna Lund		<u>-</u>					
Address:	14950 Belle Ami Drive					<u> </u>		
	Laurel, Maryland 20707							
Treasurer								
Address:			<del>,</del> <del>-</del>					
NOTE:	If necessary, you may attach an addendum to the application	ation listing additiona	l officers a	nd/or directors.				
13	Mus Clalen		12 -£4b	1:				
	(Signature of Chairman, Vice Chairman, or any Price Oden, President	officer listed in numb	ef 12 oi un	е аррисацоп)	-			
(Typed or printed name and capacity of person signing application)								

## STATE OF MARYLAND

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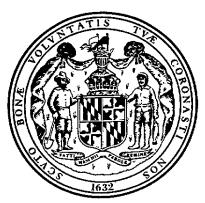
### STATE DEPARTMENT OF ASSESSMENTS AND TAXATION

301 West Preston Street Baltimore, Maryland 21201

1, NANCY GRUENINGER OF THE STATE DEPARTMENT OF ASSESSMENTS AND TAXATION OF THE STATE OF MARYLAND, DO HEREBY CERTIFY THAT SAID DEPARTMENT, BY THE LAWS OF SAID STATE, IS THE CUSTODIAN OF THE RECORDS OF THIS STATE RELATING TO THE FORFEITURE OR SUSPENSION OF CORPORATE CHARTERS, OR OF CORPORATIONS TO TRANSACT BUSINESS IN THIS STATE; AND I AM THE PROPER OFFICER TO EXECUTE THIS CERTIFICATE.

I FURTHER CERTIFY THAT ACT II COUSELING SERVICES, INC.
IS A CORPORATION DULY INCORPORATED AND EXISTING UNDER AND BY VIRTUE OF
THE LAWS OF MARYLAND AND SAID CORPORATION HAS FILED ALL
ANNUAL REPORTS REQUIRED, HAS NO OUTSTANDING LATE FILING PENALTIES ON
THOSE REPORTS, AND HAS A RESIDENT AGENT. THEREFORE, THE CORPORATION IS
AT THE TIME OF THIS CERTIFICATE IN GOOD STANDING WITH THIS DEPARTMENT
AND DULY AUTHORIZED TO EXERCISE ALL THE POWERS RECITED IN 1TS CHARTER
OR CERTIFICATE OF INCORPORATION, AND TO TRANSACT BUSINESS IN THE SLATE
OF MARYLAND.

SION OF CORPORATIONS



IN WITNESS WHEREOF, I HAVE HEREUNTO SET MY HAND AND AFFIXED THE SEAL OF THE STATE DEPARTMENT OF ASSESSMENTS AND TAXATION OF MARYLAND AT BALTIMORE THIS 27TH DAY OF OCTOBER, 1997.

NANCY GRUENINGER ADMINISTRATIVE OFFICER

AT5 - 031