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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1998 DOCUMENT # Corporation Name

(3)

CHRISTIAN COUNSELING SERVICES. INC.

Principal Place of Business	Mailing Address
% LINDA FUHRER	% LINDA FUHRER
660 W. OAKLAND PARK BOULEVARD FORT LAUDERDALE FL 33311	660 W. OAKLAND PARK BOULEVARD FORT LAUDERDALE FL 33311

FILED Mar 05 1998 8:00am Secretary of State



DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 02/08/1983 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 59-2295888 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution 23 Added to Fees 28 Zip Country Zip Country This corporation owes or has paid the corporation type Intangible 24 25 Personal Property Tax due June 30. Yes □ No 29 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent R1 Name FUHRER, LINDA 660 W. OAKLAND PARK BOULEVARD 82 Street Address (P.O. Box Number is Not Acceptable) FORT LAUDERDALE FL 33311 83 84 City 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 little if applicable (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE Change Addition TITLE 1.1 TITLE FUHRER, LINDA NAME 1.2 NAME 660 W OAKLAND PK BLVD STREET ADDRESS 1.3 STREET ADDRESS FORT LAUDERDALE, FL00000 CITY-ST-ZIP 1.4 CITY - ST - ZIP Change DELETE Andition TITLE 2.1 TITLE HOUMES, DANIEL W. 2.2 NAME 660 W OAKLAND PK BLVD. STREET ADDRESS 2.3 STREET ADDRESS FORT LAUDERDALE FL 2. 4 CITY-ST-ZIP CITY-ST-ZIP DELETE 3.1 TITLE Change ☐ Addition FUHRER, THEODORE P. NAME 3.2 NAME 660 W. OAKLAND PK BLVD. 3.3 STREET ADDRESS STREET ADDRESS FORT LAUDERDALE FL CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE Addition Change TITLE 4.1 TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change __ Addition TITLE 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE Change Addition 6.1 TITLE TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-ZIP 6.4 CITY-ST-ZIP

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an enderes.