FILED

2002 Uniform Business Report (UBR)

Mar 31, 2002 8:00 am Secretary of State DOCUMENT # G23294 1. Entity Name 03-31-2002 90326 049 ***150 00 CHRISTIAN COUNSELING SERVICES, INC. Mailing Address Principal Place of Business 2700W CYPRESS CREEK RD STE D104 2700W CYPRESS CREEK RD STE D104 FORT LAUDERDALE FL 33309-1748 FORT LAUDERDALE FL 33309-1748 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State Applied For 4. FEI Number 59-2295888 Not Applicable Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name FUHRER, LINDA Street Address (P.O. Box Number is Not Acceptable) 2700 W CYPRESS CREEK RD **STE D104** FORT LAUDERDALE FL 33309 Zip Code FL 8. 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 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing **\$5.00** May Be After May 1, 2002 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. 12. (10/6) ŊΡ ☐ Addition TITLE ☐ Delete TITLE Change FUHRER, LINDA NAME NAME CR2E034 2700 W CYPRESS CREEK RD STE D104 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP FORT LAUDERDALE FL 33309 CITY-ST-ZIP TITLE ☐ Defete TITLE ☐ Change ☐ Addition NAME HOUMES, DANIEL W. NAME STREET ADDRESS 2700 W CYPRESS CREEK RD STE D104 STREET ADDRESS FORT LAUDERDALE FL 33309 CITY-ST-7IP CITY-ST-ZIP Delete TITLE Change Addition TITLE FUHRER, THEODORE P. NAME NAME 2700 W CYPRESS RD STE D104 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP FORT LAUDERDALE FL 33309 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE TITLE ☐ Change Addition NAME NAME STREET ADORESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

13. 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 report or supplemental 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 11 or Block 12 if all other like empowered. changed, or on an attachment with an address

whier Theodore P. Fuhrer

(954) 969-5600