

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J20139

FILED
Jan 08, 2008
Secretary of State

Entity Name: BREVARD COUNSELING CENTER, INC.

Current Principal Place of Business:

2194 HWY A1A
SUITE 309
INDIAN HARBOR BECH, FL 32903 US

New Principal Place of Business:

325 MIAMI AVE
INDIALANTIC, FL 32903 US

Current Mailing Address:

PO BOX 33458
INDIALANTIC, FL 32903 US

New Mailing Address:

FEI Number: 59-2705485 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BANKS, SARA LYNN
2194 A1A
INDIAN HARBOR BEACH, FL 32937 US

Name and Address of New Registered Agent:

BANKS, SARA LYNN
325 MIAMI AVE
INDIALANTIC, FL 32903 US

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

01/08/2008

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: BANKS, SARA LYNN,
Address: PO BOX 33458
City-St-Zip: INDIALANTIC, FL 32903

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: SARA LYNN BANKS

DR

01/08/2008

Electronic Signature of Signing Officer or Director

Date