

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# K54373

FILED
Jan 31, 2002 8:00 AM
Secretary of State

Entity Name: FAMILY ALTERNATIVES/COUNSELING & TREATMENT SERVICES, INC.

Current Principal Place of Business:

3175 SOUTH CONGRESS AVENUE
SUITE 210
LAKE WORTH, FL 33461 US

Current Mailing Address:

3175 S. CONGRESS AVE
SUITE 210
LAKE WORTH, FL 33466 US

FEI Number: 65-0099459

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WILSON, JERRY A.
14889 TANGELO BOULEVARD
PALM BEACH GARDENS, FL 33412 US

New Principal Place of Business:

3175 SOUTH CONGRESS AVENUE
SUITE 106
LAKE WORTH, FL 334612527 US

New Mailing Address:

3175 S. CONGRESS AVE
SUITE 106
LAKE WORTH, FL 334612527 US

Name and Address of New Registered Agent:

WILSON, JERRY A.
1046 MANOR DRIVE
LAKE WORTH, FL 33461 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: JERRY A. WILSON

01/31/2002

Electronic Signature of Registered Agent

Date

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X).

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PSD () Delete
Name: WILSON, BILLIE H.,
Address: 1488 TANGELO BOULEVARD
City-St-Zip: PALM BEACH GARDENS, FL

Title: VTD () Delete
Name: WILSON, JERRY A.,
Address: 14889 TANGELO BOULEVARD
City-St-Zip: PALM BEACH GARDENS, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSD (X) Change () Addition
Name: WILSON, BILLIE H
Address: 1046 MANOR DRIVE
City-St-Zip: LAKE WORTH, FL 33461 US

Title: VTD (X) Change () Addition
Name: WILSON, JERRY A
Address: 1046 MANOR DRIVE
City-St-Zip: LAKE WORTH, FL 33461 US

I hereby certify that the information supplied with this filing does not qualify for the 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 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: JERRY A. WILSON

VTD

01/31/2002

Electronic Signature of Signing Officer or Director

Date