

2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000019458

FILED
Jul 01, 2004
Secretary of State

Entity Name: GABLES COUNSELING AFFILIATES P.L.C.

Current Principal Place of Business:

3692 SW 24TH STREET
MIAMI, FL 33145

New Principal Place of Business:

Current Mailing Address:

3692 SW 24TH STREET
MIAMI, FL 33145

New Mailing Address:

FEI Number: 32-0014392

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HOLT, PATRICIA A
3692 SW 24TH STREET
MIAMI, FL 33145

Name and Address of New Registered Agent:

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

_____ Date

MANAGING MEMBERS/MEMBERS:

Title: MGR () Delete
Name: HOLT, PATRICIA A
Address: 3692 S.W. 24TH ST.
City-St-Zip: MIAMI, FL 33145

ADDITIONS/CHANGES:

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

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 is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: PATRICIA A HOLT

MGR

07/01/2004

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date