

# 2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# L02000019458

FILED  
Jul 25, 2003  
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: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES:**

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

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

07/25/2003

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