

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L06000087480

**FILED**  
**Feb 14, 2010**  
**Secretary of State**

**Entity Name:** A NEW DAY COUNSELING, P.L.L.C.

**Current Principal Place of Business:**

1401 BUDINGER AVE  
STE I  
ST. CLOUD, FL 34769 US

**New Principal Place of Business:**

1401 BUDINGER AVE  
STE E  
ST. CLOUD, FL 34769 US

**Current Mailing Address:**

1401 BUDINGER AVE  
STE I  
ST. CLOUD, FL 34769 US

**New Mailing Address:**

1401 BUDINGER AVE  
STE E  
ST. CLOUD, FL 34769 US

**FEI Number:** 20-5504322

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

LEFKOWITZ, IVAN M  
430 N MILLS AVE  
ORLANDO, FL 32803 US

**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/MANAGERS:**

Title: MGR  
Name: RUSSELL, BARBARA J LMHC  
Address: 1401 BUDINGER AVE  
City-St-Zip: ST. CLOUD, FL 34769 US

I hereby 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: BARBARA J RUSSELL

MGR

02/14/2010

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