2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000003697

FILED Apr 30, 2009 Secretary of State

Entity Name: CORNERSTONE COUNSELING LLC

Current Principal Place of Business: New Principal Place of Business: 502 B S FERDON BLVD CRESTVIEW, FL 32536 **Current Mailing Address: New Mailing Address:** 207 WESTVIEW DR CRESTVIEW, FL 32536 FEI Number: 43-2117666 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: ANDERSON, MISTI D 207 WESTVIEW DR CRESTVIEW, FL 32536 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 Date MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES: MGR Title: () Change () Addition () Delete ANDERSON, MISTI D Name: Name: Address: 207 WESTVIEW DR Address: City-St-Zip: CRESTVIEW, FL 32536 City-St-Zip: Title: MGR () Delete Title: () Change () Addition Name: SMITH, LOLITA Name: Address: 145 W OLD MILL WAY Address: City-St-Zip: CRESTVIEW, FL 32536 City-St-Zip: Title: MGRM (X) Delete Title: () Change () Addition PARKER, VALARIE Name: Name: 145 W OLD MILL WAY Address: Address: City-St-Zip: CRESTVIEW, FL 32536 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 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: MISTI ANDERSON 04/30/2009