2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 01, 2009
Secretary of State

DOCUMENT# N02000001338

Entity Name: DECIDE CHRISTIAN COUNSELING CENTER, INC.

Current Principal Place of Business:

2500 W OAKRIDGE RD
ORLANDO, FL 32809

New Principal Place of Business:

Current Mailing Address:

2500 W OAKRIDGE ROAD
ORLANDO, FL 32809

New Mailing Address:

FEI Number: 03-0388345 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

PEÑA, LUIS A MS
7032 EDGEWORTH DR.
ORLANDO, FL 32819 US

Name and Address of New Registered Agent:

SANCHEZ, TRINIDAD
229 CHICAGO WOODS
ORLANDO, FL 32824 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: TRINIDAD SANCHEZ 04/01/2009
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: GONZALEZ, SATURNINO REV
Address: 850 WHISPERING CYPRESS LANE
City-St-Zip: ORLANDO, FL 32824

Title: D ( ) Delete
Name: PEÑA, LUIS A
Address: 7032 EDGEWORTH DR.
City-St-Zip: ORLANDO, FL 32819

Title: D ( ) Delete
Name: OLIVO, LAURA
Address: 1413 MIMI CT
City-St-Zip: KISSIMMEE, FL 34744

Title: D ( ) Delete
Name: RAMOS, LUIS
Address: 7948 SNOWBERRY CIRCLE
City-St-Zip: ORLANDO, FL 32819

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: D (X) Change ( ) Addition
Name: SANCHEZ, TRINIDAD
Address: 229 CHICAGO WOODS
City-St-Zip: ORLANDO, FL 32824

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

Title: ( ) Change ( ) Addition
Name:
Address:
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 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: LUIS RAMOS D 04/01/2009
Electronic Signature of Signing Officer or Director Date