

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000002774

FILED
Apr 30, 2008
Secretary of State

Entity Name: ONE TO ONE FAMILY CHRISTIAN COUNSELING, INC.

Current Principal Place of Business:

435 SOUTH RIDGEWOOD STREET
DAYTONA BEACH, FL 32114

New Principal Place of Business:

Current Mailing Address:

435 SOUTH RIDGEWOOD STREET
DAYTONA BEACH, FL 32114

New Mailing Address:

FEI Number: 59-3464162

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CHURCH, ANTONIO L
435 SOUTH RIDGEWOOD STREET
DAYTONA BEACH, FL 32114 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

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: CHURCH, BRIAN E
Address: 903 WILLIMINGTON LANE
City-St-Zip: ORANGR PARK, FL 32065

Title: VPD () Delete
Name: CHURCH, WILLIE MAE
Address: 124 VILLAGE LANE
City-St-Zip: DAYTONA BEACH, FL 32119

Title: VPD () Delete
Name: LUCAS, BRENDA
Address: 52 BATTLEGREEN DR.
City-St-Zip: ROCHESTER, NY 14624

Title: D () Delete
Name: ANTHONY, CHURCH P
Address: 138 TROUP ST
City-St-Zip: ROCHESTER, NY 14608

Title: SD () Delete
Name: SMITH, SHARON
Address: 124 VILLAGE LANE
City-St-Zip: DAYTONA BEACH, FL 32119

Title: D () Delete
Name: CHURCH, ANTONIO
Address: 124 VILLAGE LANE
City-St-Zip: DAYTONA BEACH, FL 32119

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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: ANTONIO L. CHURCH

D

04/30/2008

Electronic Signature of Signing Officer or Director

Date