

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000010888

FILED
May 01, 2006
Secretary of State

Entity Name: LIVING IN FREEDOM COUNSELING, INC.

Current Principal Place of Business:

17689 NW 78 AVENUE
MIAMI, FL 33015

New Principal Place of Business:

Current Mailing Address:

17689 NW 78 AVENUE
MIAMI, FL 33015

New Mailing Address:

FEI Number: FEI Number Applied For (X) FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

VELEZ, ANN C
17801 NW 84COURT
MIAMI, FL 33015 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: D () Delete
Name: VELEZ, ANN C
Address: 17801 NW 84 COURT
City-St-Zip: MIAMI, FL 33015 US

Title: D () Delete
Name: GONZALEZ, ROSA
Address: 20041 NW 2 STREET
City-St-Zip: MIAMI, FL 33029

Title: D () Delete
Name: RAMIREZ, BLAS
Address: 164 SPARROW DRIVE APT 164
City-St-Zip: ROYAL PALM BEACH, FL 33411

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: VELEZ, ANN C
Address: 17801 NW 84 COURT
City-St-Zip: MIAMI, FL 33015 US

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

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

Title: D () Change (X) Addition
Name: VELEZ, ANN
Address: 17801 NW 84 COURT
City-St-Zip: MIAMI, FL 33015

I hereby certify that the information supplied with this filing does not qualify for the 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: ANN CAROLYN VELEZ

P

05/01/2006

Electronic Signature of Signing Officer or Director

Date