

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000006584

FILED
Feb 04, 2009
Secretary of State

Entity Name: COUNSELING AND RESEARCH GROUP LCFS, INC.

Current Principal Place of Business:

2811 BANYON ST.
PANAMA CITY, FL 32408

New Principal Place of Business:

13110 SW 7TH PLACE
DAVIE, FL 33325

Current Mailing Address:

2811 BANYON ST.
PANAMA CITY, FL 32408

New Mailing Address:

13110 SW 7TH PLACE
DAVIE, FL 33325

FEI Number:

FEI Number Applied For (X)

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MANGUNO, ANA
2811 BANYON ST.
PANAMA CITY, FL 32408 US

Name and Address of New Registered Agent:

MCLELLAN, JOHN
13110 SW 7TH PLACE
DAVIE, FL 33325 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: JOHN MCLELLAN

02/04/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PV () Delete
Name: MANGUNO, ANA
Address: 2811 BANYON ST.
City-St-Zip: PANAMA CITY, FL 32408

Title: ST () Delete
Name: REED, ROY
Address: 4820 SENAC DR.
City-St-Zip: METAIRIE, LA 70003

Title: D () Delete
Name: MCLELLAN, JOHN
Address: 4747 HOLLYWOOD BLVD., STE. PMB 238
City-St-Zip: HOLLYWOOD, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: D (X) Change () Addition
Name: MCLELLAN, JOHN
Address: 13110 SW 7TH PLACE
City-St-Zip: DAVIE, FL 33325

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: JOHN MCLELLAN

MR

02/04/2009

Electronic Signature of Signing Officer or Director

Date