## 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N09000009079

Apr 13, 2<u>01</u>0 Secretary of State

Entity Name: ALPHA CHRISTIAN COUNSELING SERVICES OF PALM COAST INC

**Current Principal Place of Business: New Principal Place of Business:** 

1 FLORIDA PARK DRIVE UNIT 207 9 PALM HARBOR VILLAGE WAY PALM COAST, FL 32137

SUITE D

PALM COAST, FL 32137

**Current Mailing Address: New Mailing Address:** 

1 FLORIDA PARK DRIVE UNIT 207 65 BOSTON LN

PALM COAST, FL 32137 PALM COAST, FL 32137

FEI Number: 27-1156910 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:

BARBOSA, MARIA P DR. 65 BOSTON LN.

PALM COAST, FL 32137 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

## **OFFICERS AND DIRECTORS:**

BARBOSA, MARIA P DR. Name: Address: 65 BOSTON LN. City-St-Zip: PALM COAST, FL 32137

Title:

Name: BARBOSA, JOAQUIM Address: 65 BOSTON LN. City-St-Zip: PALM COAST, FL 32137

Title:

POLANCO, DANILO A REV. Name: 4888 ADAIR OAK DR Address: City-St-Zip: ORLANDO, FL 32829

Title:

XAVIER, MARCOS R Name: Address: 39 A BRITTANY LN City-St-Zip: PALM COAST, FL 32137

I hereby 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 all other like empowered.

SIGNATURE: MARIA P BARBOSA D 04/13/2010