

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N11000003283

FILED  
Mar 30, 2012  
Secretary of State

**Entity Name:** OUR HEART 2 YOURS COUNSELING SERVICE, INC.

**Current Principal Place of Business:**

2211 S KIRKMAN RD  
234  
ORLANDO, FL 32811

**New Principal Place of Business:**

410 N DILLARD STREET  
STE 104  
WINTER GARDEN, FL 34787

**Current Mailing Address:**

2211 S KIRKMAN RD  
234  
ORLANDO, FL 32811

**New Mailing Address:**

410 N DILLARD STREET  
104  
WINTER GARDEN, FL 34787

**FEI Number:** 45-1347756

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

THOMAS, GREGORY A  
2211 S KIRKMAN RD  
234  
ORLANDO, FL 32811 US

**Name and Address of New Registered Agent:**

THOMAS, GREGORY A  
410 N DILLARD STREET  
104  
WINTER GARDEN, FL 34787 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:** GREGORY THOMAS

03/30/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

**Title:** P  
**Name:** THOMAS, GREGORY A  
**Address:** 410 N DILLARD STREET  
**City-St-Zip:** WINTER GARDEN, FL 34787

**Title:** VP  
**Name:** MARSHAL, SHANQUAL  
**Address:** 410 N DILLARD STREET  
**City-St-Zip:** WINTER GARDEN, FL 34787

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:** GREGORY THOMAS

P

03/30/2012

Electronic Signature of Signing Officer or Director

Date