

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N40700

FILED
Mar 22, 2007
Secretary of State

Entity Name: MENTAL HEALTH COMMUNITY CENTERS, INC.

Current Principal Place of Business:

240-B S TUTTLE AVE
SARASOTA, FL 34237 US

New Principal Place of Business:

Current Mailing Address:

240-B S TUTTLE AVE
SARASOTA, FL 34237 US

New Mailing Address:

FEI Number: 65-0238526 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

SHULTS, THOMAS, ESQUIRE
720 SOUTH ORANGE AVENUE
SARASOTA, FL 34236 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: TD () Delete
Name: BRUNKEN, HARRY
Address: 4022 COUNTRY VIEW DR.
City-St-Zip: SARASOTA, FL 34233

Title: PD () Delete
Name: RAKOFF, MYRA M
Address: 5165 KESTRAL PARK LANE
City-St-Zip: SARASOTA, FL 34231

Title: VD () Delete
Name: PETERMAN, BEVERLY
Address: 3415 WINDING OAKS DR
City-St-Zip: LONGBOAT KEY, FL 34228

Title: MD () Delete
Name: EAGEN, CAROLYN
Address: 240 B SOUTH TUTTLE
City-St-Zip: SARASOTA, FL 34237

Title: VD () Delete
Name: WALLACE, WILLIAM
Address: 4683 WILLOW WOOD CIR.
City-St-Zip: SARASOTA, FL 34241

Title: SD () Delete
Name: OSBORNE, DON
Address: 6246 WILLET COURT
City-St-Zip: SARASOTA, FL 34202

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: TD (X) Change () Addition
Name: CHADWIDK-ROUSMANIERE, DALE
Address: 722 NORTH SHORE DRIVE
City-St-Zip: ANNA MARIA, FL 34216

Title: PD (X) Change () Addition
Name: SHULTS, THOMAS
Address: 720 S. ORANGE AVE
City-St-Zip: SARASOTA, FL 34236

Title: VD (X) Change () Addition
Name: VAN ULLEN, LISA
Address: 626 ALHAMBRA ROAD # 603E
City-St-Zip: VENICE, FL 34285

Title: ED (X) Change () Addition
Name: EAGEN, CAROLYN
Address: 240 B SOUTH TUTTLE
City-St-Zip: SARASOTA, FL 34237

Title: VD (X) Change () Addition
Name: JOSEPH, LARUSSO
Address: 4888 TIVOLI AVE
City-St-Zip: SARASOTA, FL 34235

Title: SD (X) Change () Addition
Name: MACKEY, PATRICK
Address: 3117 57TH AVE CIRCLE EAST
City-St-Zip: BRADENTON, FL 34203

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: CAROLYN EAGEN

ED

03/22/2007

Electronic Signature of Signing Officer or Director

_____ Date