

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N40700

FILED  
Apr 24, 2008  
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:

CHINAULT, KEVIN L  
240 B SOUTH TUTTLE AVE  
SARASOTA, FL 34237 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: KEVIN CHINAULT

04/24/2008

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

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

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

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

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

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

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

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: TD (X) Change ( ) Addition  
Name: BROTHERTON, KRISTA  
Address: 1830 S. OSPREY AVE SUITE 102  
City-St-Zip: SARASOTA, FL 34239

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

Title: VD (X) Change ( ) Addition  
Name: CONBOY, KERRY  
Address: 8425 GARDENS CIRCLE #103  
City-St-Zip: SARASOTA, FL 34243

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

Title: VD (X) Change ( ) Addition  
Name: COELINGH, SUZANNE  
Address: 7085 WILD HORSE CIRCLE  
City-St-Zip: SARASOTA, FL 34241

Title: SD (X) Change ( ) Addition  
Name: ELMORE, DOUGLAS J  
Address: 50 CENTRAL AVENUE SUITE 700  
City-St-Zip: SARASOTA, FL 34236

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: CAROLYN EAGEN

ED

04/24/2008

Electronic Signature of Signing Officer or Director

Date