2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

Mailing Address

DOCUMENT # N9800000925

Principal Place of Business

DR. BRITTON'S CHRISTIAN COUNSELING/TEMPERAMENT C ENTER, INC.



FILED Jul 21, 2003 8:00 am Secretary of State

07-21-2003 90122 014 ****61.25

904-744-9445

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1812 UNIVERSITY BOULEVARD NORTH JACKSONVILLE FL 32216			6137 BOUND LAKE RD N JACKSONVILLE FL 32216										
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2. Principal Place of Business 1343 ROGERO RD.			3. Mailing Address 1343 ROGERO RD.					OLDI ODIN ODNI SONI EGIN EGIN	 				
Suite, Apt. #, etc.			Suite, Apt. #, etc.				☐ CHECK HERE IF MAKING CHANGES						
STE. 101			STE. 101				Check here if Making Changes						
SACKSONVILLE, FL			City & State JACKSONV	E, 12	L,	33 0430000			oplied For ot Applicable				
Zip Country 32211 DUVAL			32211	untry VAL		5. Certificate of Status Desired See Required Fee Required							
		and Address of Current R					7. Name and Address of New Registered Agent						
	- Andread mile articular	Carrier Carrier Commence	مويومان نجر الشج بالمائية المحسورية	ه آمين ه	** *Name: A								
	, ruth b d				Street Address (P.O. Box Number is Not Acceptable)								
		OULEVARD SOUTH											
JACKSUI	NVILLE FL 3	32210			6137 ROUND LAKE RD. N.								
<u> </u>			JA	SACKSONVILLE FL Zip Code 32277									
	8. 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. I am familiar with, and accept the obligations of registered agent.												
A.			ز کیے					7	/ X	ļ			
SIGNATURE DESERTE BANTON 1-18-03													
5,4,1,1,0,4,2	Signature, typed	or printed name of registered agent en	d title if applicable. (NOT	E: Registere	d Agent signati	re required	when reinstating)	DAT	E				
		: FEE IS \$61.25	9. Election Car		_	_	\$5.00 May Be		eck Payable				
After Sept	tember 10,	2003, min will be \$23	6.25 Trust Fund (Contributi	ion.		Added to Fees	Florida Dep	artment of S	State			
10.		OFFICERS AND DIRE	CTORS	11.			ADDITIONS/CHANG	ES TO OFFICERS AND	DIRECTORS IN	1 10			
TITLE	PD		☐ Delete	TITLE	1	·	155/115115/5/11/11/15	1001100110110	Change	Addition			
NAME								0000		_			
STREET ADDRESS		ERSITY BOULEVARD SO	DUTH		ET ADDRESS	JACKSONVILLE, FL 32211							
CITY-ST-ZIP		VILLE FL 32216		CITY	-ST-ZIP	JA	CKSONAL	LLE, FL 3	32211				
TITLE	D	DEMETRIO	≭ Delete	TITLE					Change	☐ Addition			
NAME STREET ADDRESS	DRISKELL,	NAMI STRE	ET ADDRESS										
CITY-ST-ZIP	1812 UNIVERSITY BOULEVARD SOUTH JACKSONVILLE FL 32216									ł			
TITLE	·TD	۰ تاآلE	الفائد لا ياجا	<u> جو</u> ر ب			K Change	Addition					
NAME	BRITTON,		□ Delete	NAME	F		,	_	- •	_			
STREET ADDRESS	1812 UNIVERSITY BOULEVARD SOUTH							RO RD. ST					
CITY-ST-ZIP		VILLE FL 32216		CITY-	-ST-ZIP	JAC	PKSONUI	LLE, FL3	2211				
TITLE NAME	SD	I ADETA C	☐ Delete	TITLE			•		🔀 Change	☐ Addition			
STREET ADDRESS	BRITTON,	ersity boulevard so	NITH	NAME STREE	ET ADDRESS	134	3 ROGE	RO RD. STI	E-101	}			
CITY-ST-ZIP		VILLE FL 32216	JO117		-ST-ZIP			LE, FL 32					
TITLE	D		☐ Delete	TITLE					™ Change	Addition			
NAME	WILLIAMS,	KIM		NAME	E			^ ~ ^ ~		_			
STREET ADDRESS	1812 UNIVERSITY BLVD S				ET ADDRESS	•		RO RD. S		I .			
CITY-ST-ZIP		VILLE FL 32216			-ST-ZIP	JAC	KSONU	LLE, FL	32211				
TITLE	SRS	. CVNTLIN	Delete	TITLE					Change	☐ Addition			
NAME STREET ADDRESS		a, cynthia Ersity Boulevard Sc	NITH	NAME	E Et address								
CITY-ST-ZIP		VILLE FL 32216	/UIII		-ST-ZIP								
12. I hereby o	ertify that the	information supplied with the	nis filing does not qualify for	the exer	mption state	ed in Sec	ction 119.07(3)(i). Flo	orida Statutes. I further o	certify that the in	formation			
12. Thereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if													
changed,	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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered. PRESIDENT												

PRESIDENT DRIRUTH B. BRITTON