

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 03, 2004 08:00 AM
Secretary of State

DOCUMENT # N99000000968	
1. Entity Name CENTRAL FLORIDA MENTAL HEALTH GROUP, INC.	

Principal Place of Business 3750 LAKE CENTER LOOP MT. DORA, FL 32757	Mailing Address 3750 LAKE CENTER LOOP MT. DORA, FL 32757
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04092004 No Chg-NP CR2E037 (10/03)

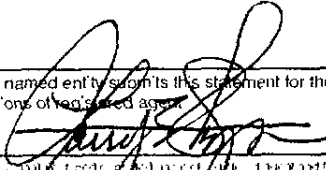
DO NOT WRITE IN THIS SPACE

4. FID Number 59-3564526	Added For Not Added
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5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent SHYERS, LARRY E 3750 LAKE CENTER LOOP MT. DORA, FL 32757
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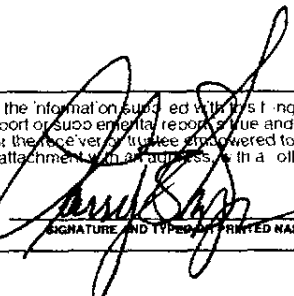
DO NOT WRITE IN THIS SPACE

8. The above named entity subscribes 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 the registered agent.		
SIGNATURE 	Larry E. Shyers, PhD President	4/28/04

Filing Fee is \$61.25 Due by May 1, 2004	9. Election Campaign Financing Trust Fund Contribution ☐	\$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY ST ZIP	PD SHYERS, LARRY E 3750 LAKE CENTER LOOP MOUNT DORA, FL 32757
TITLE NAME STREET ADDRESS CITY ST ZIP	TD SHYERS, LARRY E 3750 LAKE CENTER LOOP MOUNT DORA, FL 32757
TITLE NAME STREET ADDRESS CITY ST ZIP	D WILSON, TODD 79 LANCER OAK DRIVE APOPKA, FL 32712
TITLE NAME STREET ADDRESS CITY ST ZIP	
TITLE NAME STREET ADDRESS CITY ST ZIP	
TITLE NAME STREET ADDRESS CITY ST ZIP	

DO NOT WRITE IN THIS SPACE

12. I hereby certify that the information submitted with this filing does not qualify for the exemption stated in Section 119.07(3)(c), Florida Statutes. I further certify that the information indicated on this report or supplemental reports is true and accurate and that my signature shall have the same legal effect as I made under oath, that I am an officer or director of the corporation or the sole proprietor, 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, or in a other like empowered.		
SIGNATURE 	Larry E. Shyers President	4/28/04 352-383-2194