

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000003739

FILED
Jun 29, 2009
Secretary of State

Entity Name: GENESIS COUNSELING CENTER, INC.

Current Principal Place of Business:

1501 BUILDING RIDGEWOOD AVE
STE 213
HOLLY HILL, FL 32117

New Principal Place of Business:

Current Mailing Address:

336 S HALIFAX DR
ORMOND BEACH, FL 321778111

New Mailing Address:

FEI Number: 59-3583580 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

PALMETTO CHARTER SERVICES, INC.
150 MAGNOLIA AVE.
DAYTONA BEACH, FL 32114 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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: TOZER, REBECCA C
Address: 1316 NORTHSIDE DR
City-St-Zip: ORMOND BEACH, FL 321743959

Title: D () Delete
Name: STILLION, JUDITH A
Address: 235 ANN RUSTIN DR
City-St-Zip: ORMOND BEACH, FL 321764131

Title: D () Delete
Name: HAZEN, CONRAD A
Address: 77 N ST ANDREWS DR
City-St-Zip: ORMOND BEACH, FL 321743863

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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: TIMOTHY MCNEIL

PRES

06/29/2009

Electronic Signature of Signing Officer or Director

Date