

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000003810

FILED
Mar 27, 2009
Secretary of State

Entity Name: WANNER'S COUNSELING SERVICES, INC.

Current Principal Place of Business:

108 N MAGNOLIA AVE
SUITE 500-B
OCALA, FL 344756682

New Principal Place of Business:

108 N MAGNOLIA AVE
SUITE 500-B
OCALA, FL 34475

Current Mailing Address:

108 N MAGNOLIA AVE
SUITE 500-B
OCALA, FL 344756682

New Mailing Address:

108 N MAGNOLIA AVE
SUITE 500-B
OCALA, FL 34475

FEI Number: 59-3617663

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ADAMSON-WANNER, DON
108 N MAGNOLIA AVE
SUITE 500-B
OCALA, FL 344756682 US

Name and Address of New Registered Agent:

ADAMSON-WANNER, DON
108 N MAGNOLIA AVE
SUITE 500-B
OCALA, FL 34475 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:

03/27/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: MR () Delete
Name: ADAMSON-WANNER, DON L.M.H.C
Address: 108 N MAGNOLIA AVE, SUITE 500-B
City-St-Zip: OCALA, FL 344756682 US

Title: MS () Delete
Name: ADAMSON-WANNER, ROBIN L.M.H.C
Address: 108 N. MAGNOLIA AVE, SUITE 500 B
City-St-Zip: OCALA, FL 34475 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: MR (X) Change () Addition
Name: ADAMSON-WANNER, DON L.M.H.C
Address: 108 N MAGNOLIA AVE, SUITE 500-B
City-St-Zip: OCALA, FL 34475 US

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DON ADAMSON-WANNER

PRES

03/27/2009

Electronic Signature of Signing Officer or Director

Date