2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000023058

Entity Name: FAMILY COUNSELING CENTER, INC.

BRADENTON, FL 34207 US

City-St-Zip:

FILED Jan 05, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 439 CORTEZ RD. WEST BRADENTON, FL 34207 US **Current Mailing Address: New Mailing Address:** 439 CORTEZ RD. WEST BRADENTON, FL 34207 US FEI Number: 65-0983498 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: MARTIN, LINDA M FAMILY COUNSELING CENTER, INC. 439 CORTEZ RD. W. BRADENTON, FL 34207 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 Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: PRES () Delete Title: () Change () Addition Name: MARTIN, LINDA M Name: 439 CORTEZ ROAD WEST Address: Address: City-St-Zip: BRADENTON, FL 34207 US City-St-Zip: () Delete Title: DIR Title: () Change () Addition MARTIN, LEE S III Name: Name: 439 CORTEZ RD. WEST Address: 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: LINDA M. MARTIN PRES 01/05/2008