

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000007430

FILED
Apr 27, 2008
Secretary of State

Entity Name: PERCY RICKETTS, M.S., LMHC, P.A.

Current Principal Place of Business:

10031 PINES BOULEVARD
242
PEMBROKE PINES, FL 33024

New Principal Place of Business:

Current Mailing Address:

10031 PINES BOULEVARD,
242
PEMBROKE PINES, FL 33024

New Mailing Address:

10031 PINES BOULEVARD
242
PEMBROKE PINES, FL 33024

FEI Number: 65-1071784

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

RICKETTS, PERCIVAL
10031 PINES BLVD
242
PEMBROKE PINES, FL 33024 US

Name and Address of New Registered Agent:

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:

Title: PC () Delete
Name: RICKETTS, PERCIVAL G
Address: 10031 PINES BLVD. #242
City-St-Zip: PEMBROKE PINES, FL 33024

Title: ST () Delete
Name: RICKETTS, ERICA
Address: 1501 SW 97TH AVE.
City-St-Zip: PEMBROKE PINES, FL 33025

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

SIGNATURE: PERCIVAL RICKETTS

PC

04/27/2008

Electronic Signature of Signing Officer or Director

Date