2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000047617

FILED Apr 20, 2009 Secretary of State

Entity Name: MILLENNIUM COMMUNITY MENTAL HEALTH CENTER, INC.

Current Principal Place of Business:		New Principal Place of Business:			
2955 S.W					
SUITE 202 MIAMI, FL					
IVII/~IVII, I L	33133				
Current Mailing Address:		New Mailing Address:			
2955 S.W SUITE 202 MIAMI, FL	2				
FEI Number	: 30-0173014	FEI Number Applied For ()	FEI Number Not App	licable ()	Certificate of Status Desired ()
Name and	d Address of C	urrent Registered Agent:	Name and	Address of	New Registered Agent:
3400 CÓF SUITE #60		s			
	e named entity s e of Florida.	submits this statement for the	purpose of changing i	ts registered	office or registered agent, or both,
in the Stat	e of Florida.	submits this statement for the	purpose of changing i	ts registered	office or registered agent, or both,
in the Stat	e of Florida. ´ RE:	submits this statement for the ic Signature of Registered A		ts registered	office or registered agent, or both, Date
in the Stat SIGNATU	e of Florida. RE: Electron			ts registered	
in the Stat SIGNATU Election Ca	e of Florida. RE: Electron	ic Signature of Registered Aલ g Trust Fund Contribution ().	gent		
in the Stat SIGNATU Election Ca OFFICER Title: Name: Address:	e of Florida. RE: Electron mpaign Financing S AND DIREC	ic Signature of Registered Aggrust Fund Contribution (). TORS: Delete .E /AY, #601	gent	IS/CHANGE	Date
in the Stat SIGNATU Election Ca	e of Florida. RE: Electron mpaign Financing S AND DIREC PSD () OTERO, MARIA 3400 CORAL W MIAMI, FL 331	ic Signature of Registered Ag Trust Fund Contribution (). TORS: Delete 1E 1/AY, #601 Delete 1E 1/AY, #601	gent ADDITION Title: Name: Address:	IS/CHANGE	Date S TO OFFICERS AND DIRECTOR

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: MARIA E. OTERO PSD 04/20/2009