

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000049819

Entity Name: PEGGY BAILEY LMHC, INC.

FILED  
Apr 07, 2005  
Secretary of State

## Current Principal Place of Business:

744 STATE RD 13 N, STE 7  
FRUIT COVE, FL 32259

## New Principal Place of Business:

## Current Mailing Address:

P O BOX 16952  
JACKSONVILLE, FL 322456952

## New Mailing Address:

744 STATE RD 13 N, STE 7  
FRUIT COVE, FL 32259

FEI Number: 20-0857345

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

BAILEY, MARGARET  
744 STATE RD 13 N, STE 7  
FRUIT COVE, FL 32259 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: PVST ( ) Delete  
Name: BAILEY, MARGARET  
Address: 744 STATE RD 13 N, STE 7  
City-St-Zip: FRUIT COVE, FL 32259

Title: D ( ) Delete  
Name: BAILEY, MARGARET  
Address: 744 STATE RD 13 N, STE 7  
City-St-Zip: FRUIT COVE, FL 32259

## 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 for the exemption stated in Section 119.07(3)(i), 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: MARGARET E BAILEY

OWNE

04/07/2005

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date