


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 13, 2006 8:00 am
Secretary of State

01-13-2006 90046 045 ***150.00


EP DVNF OUI\$ P04000160394
 2/ Entity Name
 SANDY CANFIELD, LMHC, P.A.



Principal Place of Business Mailing Address
 32611 CBSL!B!FOV!OPSU 32611 CBSL!B!FOV!OPSU
 X.O!FS CBSL!GM4389 X.O!FS CBSL!GM4389

3/ Principal Place of Business 4/ Mailing Address
 2150 Park Ave. North 2150 Park Ave. North
 Suite, Apt. #, etc. Suite, Apt. #, etc.

City & State City & State
 Winter Park, FL Winter Park, FL
 Zip Country Zip Country
 32789 USA 32789 USA



01052006 Di h.Q DS3F145!22016*

5/ FEI Number 20-1983468 Applied For Not Applicable
 6/ Certificate of Status Desired %8/86 Beej!pobm Cf!iSfr vj# e
 7/ Obn f !boe!Bee# t t !pg!Dvs# o!Sf hjt u# s# e!Bhf ou
 8/ Obn f !boe!Bee# t t !pg!Of x !Sf hjt u# s# e!Bhf ou

CANFIELD, ODALIA S
 2150 PARK AVENUE NORTH
 WINTER PARK, FL 32789

Name
 Street Address (P.O. Box Number is Not Acceptable)
 City GM Zip Code

9/ 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE Odalia S. Canfield DATE 01/09/06
Signature, typed or printed name of registered agent and title applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00

10/ Election Campaign Financing Trust Fund Contribution. %6/11 Nbzi!Cf! Bee# el!p!Gf t

21/ OFFICERS AND DIRECTORS		22/ ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD CANFIELD, ODALIA S 2150 PARK AVENUE NORTH WINTER PARK, FL 32789 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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23/ I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

T.HOBVUSF: Odalia S. Canfield DATE 01/09/06 407/645-2545
T.HOBVUSF!B!OE!UZ!QE!P!S!Q!S!DU!E!O!B!N!F!P!G!T!H!O!D!V!P!G!D!F!S!P!S!E!S!F!D!U!S