

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000170736

FILED
Jan 08, 2008
Secretary of State

Entity Name: SOUTHEASTERN COMMUNITY MENTAL HEALTH CENTER, INC.

Current Principal Place of Business:

13300 SW 22 ST.
MIAMI, FL 33175

New Principal Place of Business:

13550 SW 88 STREET
SUITE 130
MIAMI, FL 33186

Current Mailing Address:

13550 KENDALL DRIVE
SUITE 130
MIAMI, FL 33186

New Mailing Address:

13550 KENDALL DRIVE
SUITE 112
MIAMI, FL 33186

FEI Number: 35-2244441

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CAMEJO, MARIA E
13300 SW 22 ST.
MIAMI, FL 33175 US

Name and Address of New Registered Agent:

CAMEJO, MARIA E
13550 SW 88 STREET
SUITE 112
MIAMI, FL 33175 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:

01/08/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P,D () Delete
Name: CAMEJO, MARIA E
Address: 13300 SW 22 ST.
City-St-Zip: MIAMI, FL 33175 US

Title: VP,D () Delete
Name: PUIG-VAZQUEZ, EVELYN
Address: 13300 SW 22 ST.
City-St-Zip: MIAMI, FL 33175 US

Title: S,D () Delete
Name: PUIG, ELENA
Address: 13300 SW 22 ST.
City-St-Zip: MIAMI, FL 33175 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P,D (X) Change () Addition
Name: CAMEJO, MARIA E
Address: 13550 SW 88 STREET #112
City-St-Zip: MIAMI, FL 33186 US

Title: VP,D (X) Change () Addition
Name: PUIG-VAZQUEZ, EVELYN
Address: 13550 SW 88 STREET #112
City-St-Zip: MIAMI, FL 33186 US

Title: S,D (X) Change () Addition
Name: PUIG, ELENA
Address: 13550 SW 88 STREET #112
City-St-Zip: MIAMI, FL 33186 US

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 CAMEJO

D

01/08/2008

Electronic Signature of Signing Officer or Director

Date