2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P05000119120

SPACE COAST COUNSELING CENTER, INC.



FILED Jan 17, 2007 08:00 AM **Secretary of State**

Principal Place of Business

3880 S. WASHINGTON AVE.

SUITE 153 TITUSVILLE, FL 32780 Mailing Address

3880 S. WASHINGTON AVE. **SUITE 153**

TITUSVILLE, FL 32780 US



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o Chg-P Applied For 13-4308090 Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

CR2E034 (11/05)

6. Name and Address of Current Registered Agent

RESH, DANIEL JR. 250 MARLIN DRIVE MERRITT ISLAND,, FL 32952

the obligations of registered agent.

DO NOT WRITE IN THIS SPACE

signature, typed or printed name of registered agent and steel applicable. (NOTE: Regissered Agent signature, typed or printed name of registered agent and steel applicable. (NOTE: Regissered Agent signature signatured why Asincasting) (DATE										
	E NOW!!! FEE 18 \$150.00 ny 1, 2007 Fee will be \$550.00	Election Campaign Financia Trust Fund Contribution.	ns 🗆	\$5.00 May Bo Added to Fees	U00000588018 01/17/07-80056-014 150.00					
10.	OFFICERS AND DIREC	TORS								
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P RESH, DANIEL JR. 3880 S. WASHINGTON AVE. TITUSVILLE, FL 32780									
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP BEASLEY, LANA 3880 S. WASHINGTON AVE. TITUSVILLE, FL 32780									
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TITLE NAME STREET ADDRESS CITY-ST-ZIP										
TITLE NAME STREET ADDRESS CITY-ST-ZIP										
12. 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 cath, that I am an officer or director of the corporation or the receiver or trustee empowered to execute this reducted this 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.										

NO OFFICER OR DIRECTOR

8. 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