

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000096989

FILED
Feb 10, 2012
Secretary of State

Entity Name: LEEVER MENTAL HEALTH COUNSELING, INC.

Current Principal Place of Business:

850 NW FEDERAL HIGHWAY
#191
STUART, FL 34994

New Principal Place of Business:

607 SAINT LUCIE CRESENT
#106
STUART, FL 34994

Current Mailing Address:

850 NW FEDERAL HIGHWAY
#191
STUART, FL 34994

New Mailing Address:

607 SAINT LUCIE CRESENT
#106
STUART, FL 34994

FEI Number: 26-0810677

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LEEVER, ERIC
3580 SE COCO PALM DR.
PALM CITY, FL 34990 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

OFFICERS AND DIRECTORS:

Title: P
Name: LEEVER, ERIC
Address: 3580 SE COCO PALM DR.
City-St-Zip: PALM CITY, FL 34990

I hereby 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 all other like empowered.

SIGNATURE: ERIC LEEVER

PRES

02/10/2012

Electronic Signature of Signing Officer or Director

Date