2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000029146

City-St-Zip:

Entity Name: NICHOLE ECKERT LMHC INC

SUNNY ISLES BEACH, FL 33160 US

FILED Apr 30, 2009 Secretary of State

Current Principal Place of Business:			New Principal Place o	New Principal Place of Business:	
16275 COLLINS APT 1102 SUNNY ISLES B	AVE EACH, FL 33160	US			
Current Mailing Address:			New Mailing Address:	New Mailing Address:	
16275 COLLINS APT 1102 SUNNY ISLES B	AVE EACH, FL 33160	US			
FEI Number: 26-230	04480 FEI Numb	er Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address of	Name and Address of New Registered Agent:	
ECKERT, NICHO 16275 COLLINS APT 1102 SUNNY ISLES B		US			
The above name in the State of Flo		s statement for the	purpose of changing its registered	office or registered agent, or both,	
SIGNATURE:					
_	Electronic Signatu	re of Registered Ag	jent	Date	
Election Campaign	Financing Trust Fund	Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
	() Delete ERT, NICHOLE E 5 COLLINS AVE APT 1	102	Title: (Name: Address:) Change () Addition	

City-St-Zip:

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: NICHOLE ECKERT, MS. LMHC PRES 04/30/2009