

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P09000039709

**FILED**  
**Apr 04, 2011**  
**Secretary of State**

**Entity Name:** SANDRA SHULESHKO, LMHC INC.

**Current Principal Place of Business:**

1680 SW BAYSHORE BLVD., SUITE 116  
PORT ST. LUCIE, FL 34984

**New Principal Place of Business:**

1680 SW BAYSHORE BLVD.  
SUITE 116  
PORT ST. LUCIE, FL 34984

**Current Mailing Address:**

1680 SW BAYSHORE BLVD., SUITE 116  
PORT ST. LUCIE, FL 34984

**New Mailing Address:**

1680 SW BAYSHORE BLVD.  
SUITE 116  
PORT ST. LUCIE, FL 34984

**FEI Number:** 26-4784583

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

SHULESHKO, SANDRA  
1680 SW BAYSHORE BLVD., SUITE 116  
PORT ST. LUCIE, FL 34984 US

**Name and Address of New Registered Agent:**

SHULESHKO, SANDRA  
1680 SW BAYSHORE BLVD.  
SUITE 116  
PORT ST. LUCIE, FL 34984 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:

Electronic Signature of Registered Agent

04/04/2011

Date

**OFFICERS AND DIRECTORS:**

Title: PRES  
Name: SHULESHKO, SANDRA  
Address: 1680 SW BAYSHORE BLVD., SUITE 116  
City-St-Zip: PORT ST. LUCIE, FL 34984

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: SANDRA SHULESHKO

PRES

04/04/2011

Electronic Signature of Signing Officer or Director

Date