

2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P93000022594

FILED
Nov 26, 2009
Secretary of State**Entity Name:** COUNSELING AND PSYCHOTHERAPY CENTERS OF FLORIDA, INC.**Current Principal Place of Business:**1532 US 41 NORTH
SUITE H
LUTZ, FL 33549 US**New Principal Place of Business:**1532 US HWY 41 NORTH
SUITE H
LUTZ, FL 33549 US**Current Mailing Address:**PO BOX 2548
LUTZ, FL 33548 US**New Mailing Address:**PO BOX 2303
LAND O LAKES, FL 34639 US**FEI Number:** 65-0389609**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**ROSENFELD, SALLY
6933 COZUMEL CT
LAND O LAKES, FL 33547 US**Name and Address of New Registered Agent:**ROSENFELD, GARY
1532 LAND O LAKES BLVD
SUITE H
LUTZ, FL 33549 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: GARY ROSENFELD

11/26/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PDS () Delete
Name: ROSENFELD, SALLY
Address: 6933 COZUMEL CT
City-St-Zip: LAND O LAKES, FL 34637

Title: VP () Delete
Name: ROSENFELD, GARY
Address: 6933 COZUMEL CT
City-St-Zip: LAND O LAKES, FL 34637

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PDS (X) Change () Addition
Name: ROSENFELD, GARY
Address: 6933 COZUMEL CT
City-St-Zip: LAND O LAKES, FL 34637

Title: VP (X) Change () Addition
Name: SPIRTAS, ROBYN VP
Address: 406 20TH ST. W
City-St-Zip: BRADENTON, FL 34205

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: GARY ROSENFELD

PRES

11/26/2009

Electronic Signature of Signing Officer or Director

Date