2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000067701

Entity Name: HARBOR CITY COUNSELING CENTERS, INC.

FILED Apr 30, 2004 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

504 N HARBOR CITY BLVD 129 W. HOIBISCUS BLVD

MELBOURNE, FL 329356531 SUITE R

MELBOURNE, FL 32901 US

Current Mailing Address: New Mailing Address:

504 N HARBOR CITY BLVD 129 W. HIBISCUS BLVD MELBOURNE, FL 329356531 SUITE R

MELBOURNE, FL 32901

FEI Number: 59-3205200 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

BURTON, SARAJANE
504 N HARBOR CITY BLVD
MELBOURNE, FL 329356531 US
BURTON, SARAJANE
3740 COREY ROAD
MALABAR, FL 32950 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: 04/30/2004

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VSD () Delete Title: VSD (X) Change () Addition Name: BURTON, JOHN R BURTON, JOHN R

Address: 504 N HARBOR CITY BLVD Address: 3740 COREY RD
City-St-Zip: MELBOURNE, FL 32935 City-St-Zip: MALABAR, FL 32950 US

Title: PTD () Delete Title: PTD (X) Change () Addition

 Name:
 BURTON, SARAJANE W
 Name:
 BURTON, SARAJANE W

 Address:
 504 N HARBOR CITY BLVD
 Address:
 3740 COREY ROAD

 City-St-Zip:
 MELBOURNE, FL 32935
 City-St-Zip:
 MALABAR, FL 32950 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: SARAJANE W. BURTON PTD` 04/30/2004