

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000067701

FILED
Apr 27, 2005
Secretary of State

Entity Name: HARBOR CITY COUNSELING CENTERS, INC.

Current Principal Place of Business:

129 W. H0IBISCUS BLVD
SUITE R
MELBOURNE, FL 32901 US

New Principal Place of Business:

129 W. HIBISCUS BLVD
SUITE R
MELBOURNE, FL 32901 US

Current Mailing Address:

129 W. HIBISCUS BLVD
SUITE R
MELBOURNE, FL 32901

New Mailing Address:

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

Name and Address of Current Registered Agent:

BURTON, SARAJANE
3740 COREY ROAD
MALABAR, FL 32950 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: VSD () Delete
Name: BURTON, JOHN R
Address: 3740 COREY RD
City-St-Zip: MALABAR, FL 32950 US

Title: PTD () Delete
Name: BURTON, SARAJANE W
Address: 3740 COREY ROAD
City-St-Zip: MALABAR, FL 32950 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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 BURTON

PTD

04/27/2005

Electronic Signature of Signing Officer or Director

Date