

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P93000072848 (3)

1. Corporation Name

PHOENIX COUNSELING GROUP INC.



Principal Place of Business

2601 N OCEAN AVE
STE G
SINGER ISLAND FL 33404
US

Mailing Address

2601 N OCEAN AVE
STE G
SINGER ISLAND FL 33404
US

3. Date Incorporated or Qualified
10/20/1993

3a. Date of Last Report
02/21/1995

2. Principal Place of Business

21 15520 BELLANCA LANE

2a. Mailing Address

26 15520 BELLANCA LN

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 City & State

23 WELLINGTON, FLA.

27 City & State

28 WELLINGTON, FLA.

24 Zip

33414

Country

25 USA

29 Zip

33414

Country

30 USA

4. FEI Number

65-0443142

Applied For
Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐ \$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

ABRAMS, DANIELLE J.
2601 N. OCEAN AVE.
SUITE 6
SINGER ISLAND FL 33404

10. Name and Address of New Registered Agent

81 Name

DANIELLE J ABRAMS

82 Street Address (P.O. Box Number is Not Acceptable)

15520 BELLANCA LN.

83

84 City

WELLINGTON

FL

85 Zip Code

33414

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Danielle J. Abrams

(NOTE: Registered Agent signature required when registering.)

5/24/96

12. OFFICERS AND DIRECTORS

TITLE D
NAME ABRAMS, DANIELLE J.
STREET ADDRESS 2601 N. OCEAN AVE STE G
CITY-ST-ZIP SINGER ISLAND FL ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DELETE

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE D
1.2 NAME DANIELLE ABRAMS ☒ Change ☐ Addition
1.3 STREET ADDRESS 15520 BELLANCA LN
1.4 CITY-ST-ZIP WELLINGTON, FLA 33414

2.1 TITLE
2.2 NAME ☐ Change ☐ Addition
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Danielle J. Abrams

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5/30/96 (407) 791-2246

Date:

Daytime Phone:

CR2E034 (12/95)