SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998. AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

FILED

Sep 24 1998 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P9700008679 (7)

JAMES CHURCH COUNSELING AND CONSULTATION, INC.

Principal Place of Business Mailing Address 907 FOREST HILL DRIVE 907 FOREST HILL DRIVE CLERMONT FL 34711 CLERMONT FL 34711 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 01/28/1997 2. Principal Place of Business 2a. Mailing Address Applied For - 3423 400 21 26 Not Applicable **\$8.75** Additional Suite, Apt. #, etc. Sulte, Apt. #, etc. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing Added to Fees Trust Fund Contribution 23 28 Zip Country Zip Country 8. This corporation owes or has paid the current year intengible Personal Property Tax due June 30. Yes No 24 29 30 Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 AMERILAWYER CHARTERED 343 ALMERIA AVENUE 82 O. Box Number is CORAL GABLES FL 33134 83 84 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 907.0505, Florida Statutes. SIGNATURE CR2E034 (5/98) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12 OFFICERS AND DIRECTORS 13. Change TITLE PTD 1.1 TITLE Addition DELETE CHURCH, JAMES LEE 1.2 NAME NAME 907 FOREST HILL DRIVE 1.3 STREET ADDRESS STREET ADDRESS CLERMONT FL 34711 CITY-ST-ZIP 1.4 CITY-ST-ZIP TITLE VSD DELETE 2.1 TITLE Change Addition CHURCH, CHERYL 2.2 NAME NAME 907 FOREST HILL DRIVE 2.3 STREET ADDRESS STREET ADDRESS CLERMONT FL 34711 2.4 CITY-ST-ZIP CITY-ST-ZIP 3.1 TITLE TITLE ___ Change Addition DELETE 3.2 NAME NAME STREET ADDRESS 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP CITY-ST-ZIP 4.1 TITLE TITLE DELETE Change Addition 4.2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP 5.1 TITLE TITLE DELETE Addition 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP 6.1 TITLE Change TITLE DELETE Addition NAME 62 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-ZIP 6.4 CITY-ST-ZIP 14. I hereby certify that the Information supplied with this filing does not qualify for the exemption stated in section 119.07(3)(i), 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.