

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000043232

FILED
Apr 04, 2005
Secretary of State

Entity Name: WELLSPRING COUNSELING CENTER, INC.

Current Principal Place of Business:

1435 COLLINGSWOOD BLVD., STE. G
PORT CHARLOTTE, FL 33948

New Principal Place of Business:

1435 COLLINGSWOOD BLVD.
SUITE G
PORT CHARLOTTE, FL 33948

Current Mailing Address:

3284 HIGHLANDS RD.
PUNTA GORDA, FL 33983

New Mailing Address:

FEI Number: 65-0837577 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WESER, STAN
3284 HIGHLANDS ROAD
PUNTA GORDA, FL 33983 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: P () Delete
Name: WESER, LINDA
Address: 3284 HIGHLANDS RD.
City-St-Zip: PUNTA GORDA, FL 33983

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: LINDA WESER

PRES

04/04/2005

Electronic Signature of Signing Officer or Director

Date