# 2003 UNIFORM BUSINESS REPORT (UBR)

**FILED**
**Apr 21, 2003**
**Secretary of State**

DOCUMENT# P99000021103

**Entity Name:** HEALTH CIRCLE COUNSELING ASSOCIATES, INC.

**Current Principal Place of Business:**

18475 MIRAMAR PARKWAY
MIRAMAR, FL 33029

**New Principal Place of Business:**

**Current Mailing Address:**

18475 MIRAMAR PARKWAY
MIRAMAR, FL 33029

**New Mailing Address:**

**FEI Number: 65-0906878** **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

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

TOMCHIK, STARLEY
4998 S.W. 86TH TERRACE
COOPER CITY, FL 33328

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

TOMCHIK, STARLEY M
18835 SW 29TH STREET
MIRAMAR, FL 33029

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: STARLEY M. TOMCHIK 04/21/2003
Electronic Signature of Registered Agent Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete
Name: TOMCHIK, STARLEY M
Address: 4998 SW 86TH TERRACE
City-St-Zip: COOPER CITY, FL 33328

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P (X) Change ( ) Addition
Name: TOMCHIK, STARLEY M
Address: 18835 SW 29TH STREET
City-St-Zip: MIRAMAR, FL 33029

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: STARLEY M. TOMCHIK PRES 04/21/2003
Electronic Signature of Signing Officer or Director Date