2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000037837

Entity Name: CRAIG P. KURTZ L.M.H.C., P.A.

FILED Feb 06, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 877 FLEMING STREET GREEN COVE SPRINGS, FL 32043 **Current Mailing Address: New Mailing Address:** PO BOX 8057 FLEMING ISLAND, FL 32006 FEI Number: 59-3582337 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: TOLSON, JOHN F ESQ. 462 KINGSLEY AVE. SUITE 101 ORANGE PARK, FL 32073 US 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: (X) Change () Addition KURTZLMHC, CRAIG P KURTZLMHC, CRAIG P Name: Name: 877 FLEMING ST PO BOX 8057 Address: Address:

City-St-Zip: GREEN COVE SPRINGS, FL 32043 City-St-Zip: FLEMING ISLAND, FL 32006

Title: VΡ Title: () Delete () Change () Addition

ARCE, SHIRLEY E Name: Name: 804 SE 7TH ST # 404D Address: Address: DEERFEILD BCH, FL 33441 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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.

Ρ SIGNATURE: CRAIG P KURTZLMHC 02/06/2009