

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000075023

FILED
Jan 19, 2009
Secretary of State

Entity Name: PINELLAS-PASCO MEDIATION CENTER, INC.

Current Principal Place of Business:

7262 S.R. 54
NEW PORT RICHEY, FL 34653

New Principal Place of Business:

7262 STATE ROAD 54
NEW PORT RICHEY, FL 34653

Current Mailing Address:

7262 S.R. 54
NEW PORT RICHEY, FL 34653

New Mailing Address:

7262 STATE ROAD 54
NEW PORT RICHEY, FL 34653

FEI Number: 59-3598440

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ATHANASON, MILLICENT B
7262 S.R. 54
NEW PORT RICHEY, FL 34653 US

Name and Address of New Registered Agent:

ATHANASON, MILLICENT B
7262 STATE ROAD 54
NEW PORT RICHEY, FL 34653 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:

01/19/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: ATHANASON, MILLICENT B
Address: 7262 S.R. 54
City-St-Zip: NEW PORT RICHEY, FL 34653

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: ATHANASON, MILLICENT B
Address: 7262 STATE ROAD 54
City-St-Zip: NEW PORT RICHEY, FL 34653

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.

SIGNATURE: MILLICENT B. ATHANASON

D

01/19/2009

Electronic Signature of Signing Officer or Director

Date