#### 2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N15000003611

Entity Name: THE JOY COUNSELING CENTER, INC.

FILED
Jan 17, 2017
Secretary of State
CC9889912986

## **Current Principal Place of Business:**

11729 FAN TAIL LANE ORLANDO. FL 32827

# **Current Mailing Address:**

11729 FAN TAIL LANE ORLANDO, FL 32827

FEI Number: 47-3753758 Certificate of Status Desired: No

### Name and Address of Current Registered Agent:

CANNON, JOY DR. 11729 FAN TAIL LANE ORLANDO, FL 32827 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

#### Officer/Director Detail:

Title PD Title TD

NameCANNON, JOY DR.NameCANNON, GARY RAddress11729 FAN TAIL LANEAddress11729 FAN TAIL LANECity-State-Zip:ORLANDO FL 32827City-State-Zip:ORLANDO FL 32827

Title SECRETARY Title VP

NameKAMARA, YVONNENameCANNON, SUSANAddress3830 CRESWICK CIRCLEAddressPO BOX 560756

City-State-Zip: ORLANDO FL 32829 City-State-Zip: ORLANDO FL 32856

Title DIRECTOR

Name MILLER, ANNETTE

Address 12569 NARCOOSSEE RD City-State-Zip: ORLANDO FL 32832

I hereby 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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: DR JOY I. CANNON PRESID

Electronic Signature of Signing Officer/Director Detail

PRESIDENT /AGENT

01/17/2017