#### 2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000003901

Entity Name: CENTER FOR CHILD COUNSELING, INC.

FILED
Apr 20, 2021
Secretary of State
6908093910CC

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

8895 N. MILITARY TRAIL

SUITE 300C

PALM BEACH GARDENS, FL 33410

## **Current Mailing Address:**

8895 N. MILITARY TRAIL SUITE 300C

PALM BEACH GARDENS, FL 33410 US

FEI Number: 65-0932032 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

LAYMAN, RENEE 8895 N. MILITARY TRAIL SUITE 300C PALM BEACH GARDENS. FL 33410 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 DC Title DV

Name LYNCH, BILL Name MILLENDER, EUGENIA

Address 8970 CYPRESS GROVE LANE Address 5205 GREENWOOD AVE #110
City-State-Zip: WEST PALM BEACH FL 33411 City-State-Zip: W. PALM BEACH FL 33407

Title CEO Title DS, DT

Name LAYMAN, RENEE E Name PETRONE, JEFFREY

Address 8895 N. MILITARY TRAIL Address 1400 CENTREPARK BLVD.

SUITE 300C SUITE

City-State-Zip: PALM BEACH GARDENS FL 33410 City-State-Zip: WEST PALM BEACH FL 33401

Title DIRECTOR Title DIRECTOR

Name STEPHENS, EDDIE Name RODRIGUEZ, JENNIFER

Address 4420 BEACON CIRCLE Address 1555 PALM BEACH LAKES BLVD.

SUITE 110
City-State-Zip: WEST PALM BEACH FL 33407

City-State-Zip: WEST PALM BEACH FL 33401

Title DIRECTOR Title DIRECTOR

 Name
 MORRIS, MADELINE
 Name
 MINTMIRE, PATSY

 Address
 100 LAKESHORE DR.
 Address
 220 SUNRISE AVE

APT 1253 Address 220 206

City-State-Zip: NORTH PALM BEACH FL 33408 City-State-Zip: PALM BEACH FL 33480

## Continues on page 2

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: RENEE LAYMAN CEO 04/20/2021

# Officer/Director Detail Continued:

Title DIRECTOR Title DIRECTOR

Name FERRIOL, JENNIFER Name HUGHES, BAILEY

Address 401 CLEMATIS ST. Address 4371 LAKE LUCERNE CIR.

3RD. FLOOR

City-State-Zip: WEST PALM BEACH FL 33401

City-State-Zip: WEST PALM BEACH FL 33409