

2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000003901

Entity Name: CENTER FOR CHILD COUNSELING, INC.**Current Principal Place of Business:**7731 N MILITARY TRAIL
#4
PALM BEACH GARDENS, FL 33418**Current Mailing Address:**7731 N. MILITARY TRAIL SUITE 4
PALM BEACH GARDENS, FL 33418 US**FEI Number:** 65-0932032**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**LAYMAN, RENEE
7731 N MILITARY TR #4
PALM BEACH GARDENS, FL 33418 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
Name	LYNCH, BILL
Address	8970 CYPRESS GROVE LANE
City-State-Zip:	WEST PALM BEACH FL 33411

Title	CEO
Name	LAYMAN, RENEE E
Address	7731 N MILITARY TRAIL #4
City-State-Zip:	PALM BEACH GARDENS FL 33410

Title	DS
Name	PETRONE, JEFFREY
Address	1400 CENTREPARK BLVD. SUITE
City-State-Zip:	WEST PALM BEACH FL 33401

Title	DV
Name	MILLENDER, EUGENIA
Address	5205 GREENWOOD AVE #110
City-State-Zip:	W. PALM BEACH FL 33407

Title	DT
Name	CROWETZ, TRUDY
Address	2600 QUANTUM BLVD.
City-State-Zip:	BOYNTON BEACH FL 33426

Title	DIRECTOR
Name	KLEINERT, GAIL
Address	2017 BEDFORD DRIVE
City-State-Zip:	PALM BEACH GARDENS FL 33403

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

04/06/2017

Electronic Signature of Signing Officer/Director Detail

Date