

2013 FOREIGN NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F08000000706

Entity Name: LOUISIANA COUNSELING AND FAMILY SERVICES, INC.

Current Principal Place of Business:

13110 SW 7TH PLACE
DAVIE, FL 33325

Current Mailing Address:

13110 SW 7TH PLACE
DAVIE, FL 33325

FEI Number: 72-1137239

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MCLELLAN, JOHN
13110 SW 7TH PLACE
DAVIE, FL 33325 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 CDPV
Name MCLELLAN, JOHN
Address 13110 SW 7TH PLACE
City-State-Zip: DAVIE FL 33325

Title ST
Name REED, ROY
Address 4820 SENAC DR.
City-State-Zip: METAIRIE LA 70003

Title VP
Name MANGUNO, ANA
Address 2811 BANYON ST
City-State-Zip: PAMAMA CITY FL 32408

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: JOHN MCLELLAN

DIRECTOR

04/23/2013

Electronic Signature of Signing Officer/Director Detail

Date