2008 FOR PROFIT CORPORATION REINSTATEMENT

FILED
Oct 24, 2008
Secretary of State

DOCUMENT# 342837

Entity Name: PSYCHOLOGICAL AND FAMILY CONSULTANTS, INC.

Current Principal Place of Business:

1254 OCALA ROAD
TALLAHASSEE, FL 32304

New Principal Place of Business:

Current Mailing Address:

1254 OCALA ROAD
TALLAHASSEE, FL 32304

New Mailing Address:

FEI Number: 59-1263156 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MADSEN JR., CHARLES H
811 ABBIEGAIL DR
TALLAHASSEE, FL 32303 US

Name and Address of New Registered Agent:

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: CHARLES H MADSEN, JR

Electronic Signature of Registered Agent — Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: MADSEN, CHARLES H JR, DR
Address: 811 ABBIEGAIL DR
City-St-Zip: TALLAHASSEE, FL 32303

Title: VP ( ) Delete
Name: MADSEN, DIANE
Address: 811 ABBIEGAIL DR
City-St-Zip: TALLAHASSEE, FL

Title: T ( ) Delete
Name: MORSE, RAQUELLE
Address: 6617 TOMY LEE TR
City-St-Zip: TALLAHASSEE, FL 32309

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

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: RAQUELLE MORSE T 10/24/2008

Electronic Signature of Signing Officer or Director — Date