2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000053357

Address:

City-St-Zip:

Entity Name: FLORIDA MEDICAL PSYCHOLOGY ASSOCIATES, L.L.C.

FILED Apr 28, 2007 Secretary of State

New Principal Place of Business: Current Principal Place of Business: 325 MEADOW BROOK COURT OLDSMAR, FL 34677 **Current Mailing Address: New Mailing Address:** 325 MEADOW BROOK COURT OLDSMAR, FL 34677 FEI Number: 06-1779303 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: TAKAGISHI, STANLEY C 10411 LIGHTNER BRIDGE DRIVE TAMPA, FL 33626 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 MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES: Title: () Change () Addition () Delete FRIEDMAN & RODRIGUEZ, PSYCHOLOGY AS SOCIATES Name: Name: Address: 13014 NORTH DALE MABRY HIGHWAY, STE. 123 Address: City-St-Zip: TAMPA, FL 33618 US City-St-Zip: Title: MGRM () Delete Title: () Change () Addition Name: KALY PSYCHOLOGICAL S, ERVICES, INC. Name: Address: 325 MEADOW BROOK COURT Address: City-St-Zip: OLDSMAR, FL 34677 US City-St-Zip: Title: MGRM () Delete Title: () Change () Addition S. CURTIS TAKAGISHI,, PH.D., P.A. Name: Name:

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 is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

Address:

City-St-Zip:

SIGNATURE: STANLEY CURTIS TAKAGISHI

10411 LIGHTNER BRIDGE DRIVE

TAMPA, FL 33626 US

04/28/2007

MGRM