File on or before May 1, 1999 or Limited Liability Company will be subject to a \$ 400.00 LATE FEE. FLORIDA DEPARTMENT OF STATE LIMITED LIABILITY COMPANY FHED Katherine Harris ANNUAL REPORT Secretary of State 1999 DIVISION OF CORPORATIONS 99 MAR - 1 AM 11:55 FILING FEE Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee \$ 188.75 Make Check Payable To: FLORIDA DEPARTMENT OF STATE Name and Mailing Address
of Limited Liability Company **DOCUMENT # L95000000560** PSYCHOLOGICAL ALLIANCE, P.L. 7501 NORTHWEST 4TH STREET, STE. 202 7501 NORTHWEST 4TH STREET, S PLANTATION FL 33317 PLANTATION FL 33317 3. Date Organized or Qualified 2 Principal Place of Business 2a. Mailing Address 3a. State of Formation 07/24/1995 FLSuite, Apt #, etc. Suite, Apt. #, etc. 4. FEI Number Applied For City & State City & State 65-0595442 Not Applicable 5. Date of Last Report 6. Certificate of Status Desired Zip Country Country \$8.75 Additional Fee Required 03/02/1998 7. Name and Address of Current Registered Agent 8. Name and Address of New Registered Agent/Office WORSHOP, CAMILLE L 305 SOUTH ANDREWS AVE., STE. 720 Street Address (P.O. Box Number is Not Acceptable) FT. LAUDERDALE FL 33301 Suite, Apt. #, etc Zip Code 9. Pursuant to the provisions of Sections 608 416 and 608,508, Florida Statutes, the above named limited liability company submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by affirmative vote of a majority of the members. I hereby accept the appointment as registered agent, and accept the obligations DATE SIGNATURE (Bog-stered Agent Accepting Applications): (NOTE Registered Agent signature tentines) when resent the pro-10. Title Managing Members/Managers **Business Street Address** City, State and Zip Code MEM HOHNECKER, LAURA C 7501 NORTHWEST 4TH STREET, PLANTATION FL WARTENBERG, CAROL MGRM 7501 NORTHWEST 4TH STREET, PLANTATION FL MEM BRIDEWATER, LISA G 7501 N.W. 4TH STREET, SUIT PLANTATION FL 100002794811---03/04/99--01080--020_ ****188.75 ****188.7\$ MAR - 3 1999

11 Ido hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3) (i). Florida Statutes. I further certify that the information indicated on this annual report is true and accurate and that my 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, and that my name appears in Block 10, or on an

teubup Carol A. Wartenberg 2/26/49/9905846044

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attachment with an address

SIGNATURE: