

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000021001

**FILED**  
**Jan 16, 2008**  
**Secretary of State**

**Entity Name:** PSYCHIATRIC PROFESSIONAL SERVICES, P.A.

**Current Principal Place of Business:**

2180 PARK AVE NORTH  
SUITE 320  
WINTER PARK, FL 32789 US

**Current Mailing Address:**

2180 PARK AVE NORTH  
SUITE 320  
WINTER PARK, FL 32789 US

**FEI Number:** 59-3232349

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**New Principal Place of Business:**

2180 N. PARK AVE.  
SUITE 320  
WINTER PARK, FL 32789 US

**New Mailing Address:**

2180 N. PARK AVE.  
SUITE 320  
WINTER PARK, FL 32789 US

**Name and Address of Current Registered Agent:**

BLANKEMEIER, JOHN MD  
2180 PARK AVE N STE 320  
WINTER PARK, FL 32789 US

**Name and Address of New Registered Agent:**

BLANKEMEIER, JOHN L  
2180 N. PARK AVE.  
SUITE 320  
WINTER PARK, FL 32789 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: JOHN L BLANKEMEIER

01/16/2008

Electronic Signature of Registered Agent

Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: PVST ( ) Delete  
Name: BLANKEMEIER, JOHN  
Address: 2180 PARK AVE. N. SUITE#320  
City-St-Zip: WINTER PARK, FL 32789 US

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PST (X) Change ( ) Addition  
Name: BLANKEMEIER, JOHN L  
Address: 2180 N. PARK AVE. SUITE#320  
City-St-Zip: WINTER PARK, FL 32789 US

Title: VP ( ) Change (X) Addition  
Name: BLANKEMEIER, SUSANNE F  
Address: 2180 N. PARK AVE, SUITE #320  
City-St-Zip: WINTER PARK, FL 32789 US

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: JOHN L BLANKEMEIER

PST

01/16/2008

Electronic Signature of Signing Officer or Director

Date