2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000008314

Entity Name: THE AMERICAN COLLEGE OF PROFESSIONAL

NEUROPSYCHOLOGY, INC.

Current Principal Place of Business:

7800 S.W. 57TH AVENUE SUITE 310

SOUTH MIAMI, FL 33143

Current Mailing Address:

7800 S.W. 57TH AVENUE SUITE 310

SOUTH MIAMI, FL 33143

FEI Number: APPLIED FOR Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CROWN, BARRY M 7800 S.W. 57TH AVENUE SUITE 310 SOUTH MIAMI, FL 33143 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

FILED Apr 24, 2013

Secretary of State

CC0274174582

Officer/Director Detail:

Title D Title I

Name CROWN, BARRY M Name REYNOLDS, CECIL

Address 7800 S.W. 57TH AVENUE, SUITE 310 Address 555 E. 5TH STREET, APT. 3001

City-State-Zip: SOUTH MIAMI FL 33143 City-State-Zip: AUSTIN TX 78701

Title D

Name LOWENTHAL, SHERYL J

Address 9130 S. DADELAND BOULEVARD,

SUITE 1511

City-State-Zip: MIAMI FL 33156

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: BARRY M CROWN PRESIDENT

Electronic Signature of Signing Officer/Director Detail

NT 04/24/2013

Date