

2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000103310

Entity Name: WESTON PSYCHCARE, P.A.

Current Principal Place of Business:

12555 ORANGE DRIVE
SUITES 202, 210 & 217
DAVIE, FL 33330

Current Mailing Address:

12555 ORANGE DRIVE
SUITES 202, 210 & 217
DAVIE, FL 33330 US

FEI Number: 36-4480398

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

GROBMAN, SETH L
2625 EXECUTIVE PARK DRIVE
SUITE 3
WESTON, FL 33331 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

Officer/Director Detail :

Title	D	Title	D
Name	GROBMAN, SETH L	Name	GROBMAN, FAITH C
Address	12555 ORANGE DRIVE SUITES 202, 210 & 217	Address	12555 ORANGE DRIVE SUITES 202, 210 & 217
City-State-Zip:	DAVIE FL 33330	City-State-Zip:	DAVIE FL 33330

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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: SETH GROBMAN

PRESIDENT

02/28/2017

Electronic Signature of Signing Officer/Director Detail

Date