2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 15, 2016
Secretary of State
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Entity Name: NEUROPSYCHOLOGY & MEMORY CENTER, P.A.

Current Principal Place of Business:

4521 EXECUTIVE DRIVE
SUITE 204
NAPLES, FL 34119

Current Mailing Address:

4521 EXECUTIVE DRIVE
SUITE 204
NAPLES, FL 34119

FEI Number: 20-4216062

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

TALBOTT, JODY E
4521 EXECUTIVE DR STE 204
NAPLES, FL 34119 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	PRES
Name	TALBOTT, JODY EPHD
Address	4521 EXECUTIVE DRIVE, SUITE 204
City-State-Zip:	NAPLES FL 34119

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: JODY TALBOTT PRES 01/15/2016

Electronic Signature of Signing Officer/Director Detail — Date