

**2018 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P15000055212

**Entity Name:** EYRING PSYCHOLOGIST INC

**Current Principal Place of Business:**

105 TRADEWINDS TERRACE  
INDIALANTIC, FL 32903--

**Current Mailing Address:**

105 TRADEWINDS TERRACE  
INDIALANTIC, FL 32903--

**FEI Number:** 47-4374363

**Certificate of Status Desired:** No

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

FLAVIN, NOONEY & PERSON  
2200 SOUTH BABCOCK STREET  
MELBOURNE, FL 32901 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	P	Title	REGISTERED AGENT
Name	EYRING III, WILLIAM	Name	FLAVIN NOONEY & PERSON CPAS
Address	105 TRADEWINDS TERRACE	Address	2200 S. BABCOCK STREET
City-State-Zip:	INDIALANTIC FL 32903	City-State-Zip:	MELBOURNE FL 32901

*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:** FLAVIN NOONEY & PERSON CPAS

**REGISTERED AGENT**

**04/29/2018**

Electronic Signature of Signing Officer/Director Detail

Date