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				ARTMENT OF STATE	May 12	1998 8	3:00a
CORPORATION ANNUAL REPORT 1998			Secretary of State DIVISION OF CORPORATIONS		Secretary of State		
		A STATES				ary Or	State
Corporation	MENT # 7	02713	(9)				
ASSOC	CIATED PSYCHOL	ogical servic	es, inc.				
Principal Place of Business Mailing Address					4 804100 40011 00010 10010 14000 19900	nter mender mender menter menter	L ATANY ALALI TAGI
D6 BULLARD PARKWAY         306 BULLARD PARKWAY           EMPLE TERRACE FL 33617         TEMPLE TERRACE FL 33617					3. Date Incorporated or Qualified     07/21/1961     4. FEt Number     Applied For		
					<b>59-1054150</b>		Applied For Not Applicabl
Principal Pl	lace of Business	2a. 26	Mailing Address		5. Certificate of Status Desired		5 Additional Required
Sulte, Apt.	#, etc.		Suite, Apt. #, etc.		6. Election Campaign Financing	\$5.0	0 May Be
City & State	θ	27	City & State	, <u>.</u>	Trust Fund Contribution           7. Is this nonprofit corporation a here	omeowners associa	d to Fees
Żip	Countr 25	28 'Y 29	Zip	Country 30	B. This corporation owes or has pa Personal Property Tax due June		Intangible
		bas of Current Regis	tered Agent		10. Name and Address of New Re		
HAROV	PATRICIA			81 Name		-1-)	
306 BUL	LARD PARKWAY				dress (P.O. Box Number Is Not Acceptal	DIB)	
TEMPLF	TERRACE FL 33617			83			
-		ting 617,0500 and 6	17 1500 Florida Cint	84 City	mountion subwith this statement for the	FL   ~	ip Code
I. Pursuant i office or re agent. I a	to the provisions of Sec egistered agent, or both im familiar with, and acc	tions 617.0502 and 6 n, in the State of Floric sept the obligations of	17.1508, Florida Stat Ja. Such change was , Section 617.0503, I		poration submits this statement for the p ation's board of directors. I hereby acce	FL   ~	•
I. Pursuant office or re agent. I al GNATURE	Signature, typed or printed name	e of registered agent and title	il applicable. {N	utes, the above-named coi s authorized by the corpora Florida Statutes.	uired when reinstating)	FL burpose of changin pt the appointment	g its registered as registered
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