2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 702713

1. Entity Name

ASSOCIATED PSYCHOLOGICAL SERVICES, INC.

FILED
May 04, 2000 8:00 am
Secretary of State

05-04-2000 90027 025 ****61.25

Principal Place of Business	Mailing Address
~~300 BULLARD PARKWAY~~ ~~TEMPLE TERRACE FL 33617~~	~~300 BULLARD PARKWAY~~ ~~TEMPLE TERRACE FL 33617-5514~~

2. Principal Place of Business	3. Mailing Address
17728 Nathan's Drive	17728 Nathan's Drive
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Tampa, FL	City & State: Tampa, FL
Zip: 33647 / Country:	Zip: 33647 / Country:

DO NOT WRITE IN THIS SPACE

4. FEI Number: 59-1054150 — Applied For. / Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
HARDY, PATRICIA ~~300 BULLARD PARKWAY~~ TEMPLE TERRACE FL 33617	Name: Street Address (P.O. Box Number is Not Acceptable): 17728 NATHAN'S DRIVE City: TAMPA FL Zip Code: 33647

8. 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: Patricia Hardy — 2/14/2000

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW: FEE IS $61.25	9. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees	Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD HARDY, MILES W ~~300 BULLARD PARKWAY~~ ~~TEMPLE TERRACE, FL 00000~~ ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☒ Change ☐ Addition 17728 NATHAN'S DRIVE TAMPA, FL 33647
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD ROTH, JACK ~~300 BULLARD PARKWAY~~ ~~TEMPLE TERRACE, FL 00000~~ ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☒ Change ☐ Addition 17728 Nathan's Drive Tampa, FL 33647
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD HARDY, PATRICIA K ~~300 BULLARD PARKWAY~~ ~~TEMPLE TERRACE, FL 00000~~ ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☒ Change ☐ Addition 17728 NATHAN'S DRIVE TAMPA, FLORIDA 33647
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition

CR2E037 (9/99)

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Patricia Hardy — 2/14/2000 — 813/988-2665

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #