


2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Sep 22, 2004 8:00 am
Secretary of State

09-22-2004 90001 006 ****66.25

DOCUMENT # 718621 1. Entity Name DADE COUNTY PSYCHOLOGICAL ASSOCIATION, INC.																																																																																																																																
Principal Place of Business C/O LUIS J. RODRIGUEZ, PH.D. 1424 ORTEGA AVE MIAMI, FL 33134 US			Mailing Address C/O LUIS J. RODRIGUEZ, PH.D. 1424 ORTEGA AVE MIAMI, FL 33134 US																																																																																																																													
2. Principal Place of Business Suite, Apt. #, etc. City & State Zip Country			3. Mailing Address Suite, Apt. #, etc. City & State Zip Country																																																																																																																													
4. FEI Number 52-1252314			Applied For <input type="checkbox"/> Not Applicable																																																																																																																													
5. Certificate of Status Desired <input type="checkbox"/>			\$8.75 Additional Fee Required																																																																																																																													
6. Name and Address of Current Registered Agent BLUM, W. BARRY 200 BISCAYNE BLVD STE 3150 MIAMI, FL 33131			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code																																																																																																																													
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. I am familiar with, and accept the obligations of registered agent.																																																																																																																																
SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>																																																																																																																																
Filing Fee is \$61.25 Due by September 8, 2004		9. Election Campaign Financing Trust Fund Contribution. <input checked="" type="checkbox"/>		\$5.00 May Be Added to Fees																																																																																																																												
Make check payable to Florida Department of State																																																																																																																																
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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: <i>Luis Rodriguez</i> Sep 8, 2004 305-552-2399																																																																																																																																
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>																																																																																																																																

54073395



Attachment
54073395
Inv. # 718621



Luis J. Rodriguez, Ph.D., CEAP
EAP c/o HR-GO
Tel: (305) 552-2399
Fax: (305) 552-3925
E-mail: dr_luis_rodriguez@fpl.com

DIVISION OF CORPORATIONS
UNIFORM BUSINESS REPORT FILINGS
P.O. BOX 1500
TALLAHASSEE, FL 32302-1500

RE: 2004 NOT-FOR-PROFIT CORP.
UNIFORM BUSINESS REPORT

DADE COUNTY PSYCHOLOGICAL
ASSOC., INC.

DEAR SIRs + LADIES,
PLEASE FORGIVE MY DELAY.
I HAVE BEEN INVOLVED IN WORKING
ON HURRICANE RESTORATION FOR THE
PAST FIVE WEEKS AND THE PAPERS
BECAME MISPLACED. IT IS MY
MISTAKE. I ASKED YOUR PARDON,
PLEASE LET ME KNOW IF YOU OWE YOU ANY PENALTY.

SINCERELY, *Luis J. Rodriguez*
LUIS J. RODRIGUEZ

DCPA Treasurer