2000 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE/

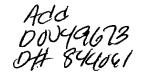
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECT

FILED DOCUMENT # 844061 May 15, 2000 8:00 am 1. Entity Name Secretary of State THE PSYCHOLOGICAL CORPORATION 05-15-2000 90297 036 ***150.00 Principal Place of Business Mailing Address 555 ACADEMIC CT ATTN: CORP TAX DEPT 6277 SEA HARBOR DR P O BOX 620428 SAN ANTONIO TX 78204 ORLANDO FL 32821 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For City & State City & State 4. FEI Number 13-1188180 Not Applicable Country Zip \$8.75 Additional Country -5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name CT CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 S. PINE ISLAND ROAD PLANTATION FL 33324 Zip Code FL 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 Signature, typed or printed name of registered agent and title if applicable DATE (NOTE Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2000 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. OFFICERS AND DIRECTORS 12. ☐ Addition ☐ Change TITLE 🔲 Delete SMITH, R A NAME STREET ADDRESS 27 BOYLSTON ST STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **CHESTNUT HILLM MA 02167** Addition ☐ Chapge TITLE ☐ Delete TITLE See ATTAChed LIST NAME KNEZ, B J NAME STREET ADDRESS 27 BOYLSTON ST STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **CHESTNUT HILL MA 02167** Change ☐ Addition ☐ Delete TITLE TITLE BANKS, MICHAEL NAME NAME STREET ADDRESS 6277 SEA HARBOR DR STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ORLANDO FL Change Addition TITLE ☐ Delete TITLE DILWORTH, JOHN R. NAME NAME 555 ACADEMIC COURT STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP SAN ANTONIÓ TX ☐ Addition Change TITLE ☐ Delete TITLE GIBBONS, PF NAME NAME 27 BOYLSTON ST STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7/P CHESTNUT HILL MA 02167 ☐ Change ☐ Addition TITLE ☐ Delete TITLE GÉLLER, ERIC P. NAME NAME ₽7 BOYLSTON ST. STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP CHESTNUT HILL MA 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 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

Daytime Phone #

THE PSYCHOLOGICAL CORPORATION

6277 SEA HARBOR DRIVE ORLANDO, FLORIDA 32887 FEDERAL ID #13-1188180



OFFICERS:

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John R. Dilworth, Chairman 555 Academic Court San Antonio, TX 78204-0952

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