



# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 12, 2005 8:00 am**  
**Secretary of State**

04-12-2005 90121 008 \*\*\*150.00

<b>DOCUMENT # F04000002172</b> 1. Entity Name <b>THE PSYCHOLOGICAL CORPORATION</b>					
Principal Place of Business <b>275 WASHINGTON STREET NEWTON, MA 02458</b>			Mailing Address <b>275 WASHINGTON STREET NEWTON, MA 02458</b>		
2. Principal Place of Business <b>2 Newton Place</b> Suite, Apt. #, etc. <b>350</b>		3. Mailing Address <b>2 Newton Place</b> Suite, Apt. #, etc. <b>350</b>		  04052005    Chg-P    CR2E034 (10/03)	
City & State <b>Newton, MA</b>		City & State <b>Newton, MA</b>			
Zip    Country <b>02458    USA</b>		Zip    Country <b>02458    USA</b>			
4. FEI Number <b>APPLIED FOR 20-1161874</b>					
5. Certificate of Status Desired: <input type="checkbox"/> \$8.75 Additional Fee Required				Applied For <input checked="" type="checkbox"/> Not Applicable	
6. Name and Address of Current Registered Agent  <b>C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324</b>			7. Name and Address of New Registered Agent  Name  Street Address (P.O. Box Number is Not Acceptable)  City <b>FL</b> 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) DATE</small>					
<b>FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees			
<b>10. OFFICERS AND DIRECTORS</b>			<b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11</b>		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VS BEEMAN, YVETTE A 275 WASHINGTON STREET NEWTON, MA 02458		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition <b>2 Newton Place, suite 350 Newton, MA 02458-1637</b>	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VCFO DICKINSON, EDWARD E 19500 BULVERDE ROAD SAN ANTONIO, TX 78230		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VT FOGARTY, KENNETH E 275 WASHINGTON STREET NEWTON, MA 02458		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition <b>2 Newton Place, suite 350 Newton, MA 02458</b>	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VAT FONTAINE, CHARLES P 275 WASHINGTON STREET NEWTON, MA 02458		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition <b>2 Newton Place, suite 350 Newton, MA 02458-1637</b>	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PCEO GALT, JEFFREY S 19500 BULVERDE ROAD SAN ANTONIO, TX 782593701		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V HORBACZEWSKI, HENRY Z 125 PARK AVENUE, 23RD FLOOR NEW YORK, NY 10017		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
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 607, 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: <u>Charles P. Fontaine</u> <b>Charles P. Fontaine - VP/Asst. T.</b> <b>Apr 11 08, 2005</b> <span style="float: right;">(617) 558-4924</span> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR    Date    Daytime Phone #</small>					

ATTACHMENT

40053461

**The Psychological Corporation**

**Directors & Officers**

**FEIN: 20-1161874/Document No.: F-04000002172**

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<b>Appointed person</b>	<b>Job Title</b>	<b>Work address</b>
Dickinson, Edward E.	Director	19500 Bulverde Road, San Antonio TX 78230
Galt, Jeffery S.	Director	19500 Bulverde Road, San Antonio TX 78259-3701
Prifitera, Aurelio	Director	19500 Bulverde Road, San Antonio TX 78259-3701
Bottoms, Linda G.	Assistant Secretary	1105 N. Market Street, Fifth Floor, Wilmington Delaware 19801
Fontaine, Charles P.	Assistant Secretary	2 Newton Place, Suite 350, Newton, MA 02458
Galt, Jeffery S.	President	19500 Bulverde Road, San Antonio TX 78230
Beeman, Yvette A.	Vice President	2 Newton Place, Suite 350, Newton, MA 02458
Horbaczewski, Henry Z.	Vice President	125 Park Avenue, 23rd Floor, New York NY 10017
Simonton, Renee	Vice President	1105 N. Market Street, Fifth Floor, Wilmington DE 19801
DeMarco, Michele L.	Assistant Treasurer	2 Newton Place, Suite 350, Newton MA 02458-1637
Fontaine, Charles P.	Assistant Treasurer	2 Newton Place, Suite 350, Newton MA 02458-1637
Formica, Lynn M.	Assistant Treasurer	2 Newton Place, Suite 350, Newton MA 02458-1637
Beeman, Yvette A.	Secretary	2 Newton Place, Suite 350, Newton MA 02458-1637
Fogarty, Kenneth E.	Treasurer	2 Newton Place, Suite 350, Newton MA 02458-1637
Fontaine, Charles P.	VP-Tax	2 Newton Place, Suite 350, Newton MA 02458-1637