## 2011 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F78847

FILED Feb 16, 2011 Secretary of State

Entity Name: ATLANTIC PSYCHIATRIC CENTERS, INC.

Current Principal Place of Business: New Principal Place of Business:

2123 FRANKLIN DRIVE PALM BAY, FL 32905 US

Current Mailing Address: New Mailing Address:

2123 FRANKLIN DRIVE PALM BAY, FL 32905 US

FEI Number: 59-2192895 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

FRESE, GARY B 930 S HARBOR CITY BLVD STE 505 MELBOURNE, FL 32901 US

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.

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SIGNATURE: Electronic Signature of Registered Agent

Date

## **OFFICERS AND DIRECTORS:**

Title:

Name: COTTON, STEPHEN D., PHD Address: 2123 FRANKLIN DRIVE City-St-Zip: PALM BAY, FL 32905

Title: \

Name: MOSELEY, THOMAS H Address: 2123 FRANKLIN DRIVE City-St-Zip: PALM BAY, FL 32905

Title: ST

Name: COHEN, ROBERT E M.D. Address: 2123 FRANKLIN DRIVE City-St-Zip: PALM BAY, FL 32905

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: STEPHEN D. COTTON PRES 02/16/2011