

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J04611

FILED  
Jan 04, 2011  
Secretary of State

**Entity Name:** PROFESSIONAL SPEECH AND HEARING SPECIALISTS, INC.

**Current Principal Place of Business:**

40 S.W. 12TH ST.  
#C-201  
OCALA, FL 34471 US

**New Principal Place of Business:**

**Current Mailing Address:**

40 S.W. 12TH ST.  
#C-201  
OCALA, FL 34471 US

**New Mailing Address:**

**FEI Number:** 59-2663388

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

TAFT, PATRICIA M  
40 SW 12TH ST  
SUITE C201  
OCALA, FL 34471 US

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

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:

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: PRES  
Name: TAFT, PATRICIA MICHELLE  
Address: 40 SW 12TH ST C201  
City-St-Zip: OCALA, FL 34471

Title: SEC  
Name: BALD, CHRISTOPHER  
Address: 40 SW 12TH ST C201{S  
City-St-Zip: OCALA, FL 34471

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: PATRICIA M TAFT

PRES

01/04/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date