

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**APPROVED
AND
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MAY - 1 AM 10:02

**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**

**CORPORATION
ANNUAL REPORT
1995**



**FLORIDA DEPARTMENT OF STATE
Sandra B. McInnis
Secretary of State
Division of Corporations**

DOCUMENT # J30786 (4)

**1. Corporation Name
CLIFFORD A. FAIRBANKS, PSY.D., P.A.**

EXPIRY DATE IN THIS SPACE

**Principal Office Address
900 E. OCEAN BLVD.
SUITE 253-F
STUART FL 34994**

**Alternate Address
900 E. OCEAN BLVD.
SUITE 253-F
STUART FL 34994**

**3. Date Incorporated or Created 08/28/1986
3a. Date of Last Report 03/30/1994**

2. Principal Office City/State 21 Stuart FL	2a. Alternate City/State 26 Stuart FL	4. FEI Number 59-2711336	☐ Applies For ☐ Not Applicable
22. State of Incorporation 22 FL	27. State of Alternate 27 FL	5. Certificate of Status Number []	\$8.75 Additional Fee Required
23. City/State 23 Stuart FL	28. City/State 28 Stuart FL	6. Electronic Campaign Financing Trust Fund Contribution []	\$5.00 May Be Added to Fees
24. []	25. []	8. This report is being filed by a person who is not a resident of Florida Florida Statutes ☒ Yes [] No	

9. Name and Address of Current Registered Agent

**KEANE, GREGORY G.
900 E. OCEAN BLVD., SUITE 244
STUART FL 34994**

10. Name and Address of New Registered Agent

01. Name	
02. Street Address (P.O. Box Number is Not Accepted)	
03. City	
04. State	FL 05. Zip Code

11. I, the undersigned, being a resident of the State of Florida, do hereby certify that the foregoing is a true and correct copy of the report required by the provisions of the Florida Statutes, Chapter 607, and that the same has been filed with the Secretary of State for the purpose of filing the same with the public.

SIGNATURE

12. OFFICER, DIRECTOR, OR SHAREHOLDER	13. ADDITIONAL OFFICER, DIRECTOR, OR SHAREHOLDER
NAME FAIRBANKS, CLIFFORD A.	NAME
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