## 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L0000007007

Entity Name: INTERNATIONAL FORENSIC PSYCHOLOGY INSTITUTE, L.L.C.

FILED Feb 07, 2006 Secretary of State

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

3595 SHERIDAN STREET 3860 SHERIDAN STREET A

HOLLYWOOD, FL 33021 HOLLYWOOD, FL 33021

Current Mailing Address: New Mailing Address:

3595 SHERIDAN STREET
105
HOLLYWOOD, FL 33021
3860 SHERIDAN STREET
A
HOLLYWOOD, FL 33021

FEI Number: 65-1019648 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:

LENORE E WALKER, ED.D.

3860 SHERIDAN STREET, SUITE A
HOLLYWOOD, FL 33021 US

WALKER, LENORE E DR
3860 SHERIDAN STREET, SUITE A
HOLLYWOOD, FL 33021 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.

SIGNATURE: DR LENORE E WALKER 02/07/2006

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

Title: MGR ( ) Delete Title: MGR (X) Change ( ) Addition

Name: INTERNATIONAL FORENS, IC PSYCHOLOGY I NSTITUT Name: INTERNATIONAL FORENS, IC PSYCHOLOGY I NSTITUT

Address: 3595 SHERIDAN STREET, #105 Address: 3860 SHERIDAN STREET, SUITE A

City-St-Zip: HOLLYWOOD, FL 33021 City-St-Zip: HOLLYWOOD, FL 33021

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: DR LENORE E WALKER RA 02/07/2006