

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000060524

FILED  
Feb 07, 2006  
Secretary of State

Entity Name: FORENSIC PSYCHOLOGY GROUP, LLC

## Current Principal Place of Business:

3860A SHERIDAN STREET  
HOLLYWOOD, FL 33021

## New Principal Place of Business:

3860 SHERIDAN STREET  
SUITE A  
HOLLYWOOD, FL 33021

## Current Mailing Address:

3860A SHERIDAN STREET  
HOLLYWOOD, FL 33021

## New Mailing Address:

3860 SHERIDAN STREET  
SUITE A  
HOLLYWOOD, FL 33021

FEI Number: 20-3048659

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

WALKER & ASSOCIATES, LLC  
3595 SHERIDAN STREET  
SUITE 105  
HOLLYWOOD, FL 33021 US

## Name and Address of New Registered Agent:

WALKER & ASSOCIATES, LLC  
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:

02/07/2006

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGR ( ) Delete  
Name: WALKER & ASSOCIATES,, LLC  
Address: 3595 SHERIDAN STREET #105  
City-St-Zip: HOLLYWOOD, FL 33021

Title: MGR ( ) Delete  
Name: DR. DAVID L. SHAPIRO, , LLC  
Address: 3595 SHERIDAN STREET #105  
City-St-Zip: HOLLYWOOD, FL 33021

## ADDITIONS/CHANGES:

Title: MGR (X) Change ( ) Addition  
Name: WALKER & ASSOCIATES,, LLC  
Address: 3860 SHERIDAN STREET, SUITE A  
City-St-Zip: HOLLYWOOD, FL 33021

Title: MGR (X) Change ( ) Addition  
Name: DR. DAVID L. SHAPIRO, , LLC  
Address: 3860 SHERIDAN STREET, SUITE A  
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: LENORE E WALKER

RA

02/07/2006

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date