

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 24, 2008 8:00 am
Secretary of State

03-24-2008 90237 050 ***138.75

DOCUMENT # L05000122254

1. Entity Name
JAMES R. BOONE, PH.D., PROFESSIONAL LLC



Principal Place of Business
2625 KEYSTONE ROAD
TARPON SPRINGS, FL 34688

Mailing Address
2625 KEYSTONE ROAD, Ste. A-3
TARPON SPRINGS, FL 34688

60016731



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

2625 Keystone Rd
Suite A-3

2625 Keystone Rd
Suite A-3

03122008 Chg-LLC CR2E083 (12/06)

City & State
TARPON SPRINGS FL

City & State
TARPON SPRINGS FL

4. FEI Number
20-3995445

Applied For
Not Applicable

Zip
34688

Country
USA

Zip
34688

Country
USA

5. Certificate of Status Desired ☐ \$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

BOONE, JAMES R PH.D.
2739 U.S. HIGHWAY 19,
SUITE 202
HOLIDAY, FL 34691

change to:
2625 Keystone Rd
Suite A-3
TARPON SPRINGS, FL
34688

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

[Signature]

(NOTE: Registered Agent signature required when reinstating)

3-18-08

DATE

FILE NOW!!! FEE IS \$138.75
After May 1, 2008 Fee will be \$538.75

Make check payable to
Florida Department of State

9. MANAGING MEMBERS/MANAGERS

10. ADDITIONS/CHANGES

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
MGR
BOONE, JAMES R PH.D. *OK*
2739 U.S. HIGHWAY 19, SUITE 202
HOLIDAY, FL 34691

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
Change
2625 Keystone Rd, Ste. A-3
TARPON SPRINGS, FL 34688

TITLE
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CITY-ST-ZIP

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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:

[Signature]

3-12-08

Date

Daytime Phone #

727
944-4600

ATTACHMENT

60016737

James R. Boone, Ph.D. Professional LLC

2625 Keystone Road, Ste. A-3

Tarpon Springs, FL 34688

TEL: 727 944-4600

FAX: 727 945-9800

EIN: 20-3995445

3-18-08

TO: State of Florida

RE: Address change

Document #: L05000122254

Dear State of Florida:

Please note that effect as of 9-7-07, my new address for James R. Boone, Ph.D. Professional LLC is:

2625 Keystone Road

Suite A-3

Tarpon Springs FL 34688

**(You are missing our
suite number in your records).**

The old address was:

2739 U.S. Hwy 19

Ste. 202

Holiday FL 34691

All phone numbers and everything else remains the same:

TEL: 727 944-4600

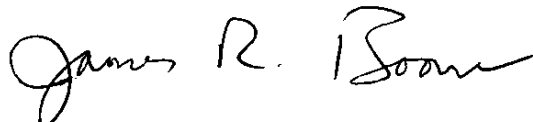
FAX: 727-945-9800

Our Tax ID is 20-3995445

If there is anything else that you need to know, please do not hesitate to ask.

Thank you.

Sincerely,



James R. Boone, Ph.D., ABPP(CN)

Diplomate in Clinical Neuropsychology

American Board of Professional Psychology

Florida Licensed Psychologist PY04361