2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 09, 2012
Secretary of State

DOCUMENT# L08000035352

Entity Name: FLORIDA PSYCHOLOGY SERVICES, LLC

Current Principal Place of Business:

230 WATER ST.
APALACHICOLA, FL 32320

New Principal Place of Business:

Current Mailing Address:

P. O. BOX 865
APALACHICOLA, FL 32329

New Mailing Address:

FEI Number: 26-2370628 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

MADSON, SARAH L
2625 NELA AVE
BELLE ISLE, FL 32809 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

MANAGING MEMBERS/MANAGERS:

Title: MGMR
Name: MADSON, SARAH L
Address: 2625 NELA AVE
City-St-Zip: BELLE ISLE, FL 32809

I hereby 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 Statues.

SIGNATURE: SARAH L MADSON MGMR 01/09/2012

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