2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Feb 19, 2012
Secretary of State

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Entity Name: PSYCHOLOGICAL COUNSELING CENTER OF SOUTHWEST FLORIDA LLC

Current Principal Place of Business:

5237 SUMMERLIN COMMONS BLVD.
FORT MYERS, FL 33907

New Principal Place of Business:

5237 SUMMERLIN COMMONS BLVD.
SUITE 102
FORT MYERS, FL 33907

Current Mailing Address:

DR. SUSAN MINSKY
16174 COCO HAMMOCK WAY
FORT MYERS, FL 33908

New Mailing Address:

FEI Number: 45-2707760 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

ELLIS, KENNTH R PHD
16174 COCO HAMMOCK WAY
FORT MYERS, FL 33908 US

Name and Address of New Registered Agent:

ELLIS, KENNETH R PHD
16174 COCO HAMMOCK WAY
FORT MYERS, FL 33908 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: KENNETH R. ELLIS, PH.D. 02/19/2012
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM
Name: MINSKY, SUSAN DR.
Address: 16174 COCO HAMMOCK WAY
City-St-Zip: FORT MYERS, FL 33908

Title: MGRM
Name: ELLIS, KENNETH R PHD
Address: 16174 COCO HAMMOCK WAY
City-St-Zip: FORT MYERS, FL 33908

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: KENNETH R. ELLIS, PH.D. MGRM 02/19/2012
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date