

2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L11000089235

FILED
Jan 30, 2012
Secretary of State

Entity Name: BAYSIDE PSYCHOLOGY SERVICES, LLC

Current Principal Place of Business:

4400 HWY 20 EAST SUITE 305
NICEVILLE, FL 32578

New Principal Place of Business:

Current Mailing Address:

4400 HWY 20 EAST SUITE 305
NICEVILLE, FL 32578

New Mailing Address:

FEI Number: 45-2918156

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BUSINESS FILINGS INCORPORATED
515 E. PARK AVENUE
TALLAHASSEE, FL 32301 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: MGRM
Name: TYLER, GRETCHEN C PHD
Address: 642 CARIBBEAN WAY
City-St-Zip: NICEVILLE, FL 32578

Title: MGRM
Name: ODHAM, STEPHEN
Address: 642 CARIBBEAN WAY
City-St-Zip: NICEVILLE, FL 32578

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 Statutes.

SIGNATURE: GRETCHEN C. TYLER

MGR

01/30/2012

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