

2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# M84259

FILED
Jan 07, 2010
Secretary of State

Entity Name: THE CENTER FOR PSYCHOLOGY, P.A.

Current Principal Place of Business:

12587 NEW BRITTANY BLVD
SUITE 21
FORT MYERS, FL 33907 US

New Principal Place of Business:

12587 NEW BRITTANY BLVD
SUITE 21 W
FORT MYERS, FL 33907 US

Current Mailing Address:

12587 NEW BRITTANY BLVD
SUITE 21
FORT MYERS, FL 33907 US

New Mailing Address:

12587 NEW BRITTANY BLVD
SUITE 21 W
FORT MYERS, FL 33907 US

FEI Number: 65-0059564

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MICHAEL, SPELLMAN B PH.D.
12587 NEW BRITTANY BLVD
SUITE 21
FORT MYERS, FL 33907 US

Name and Address of New Registered Agent:

COHEN, STEVEN D PSY.D.
12587 NEW BRITTANY BLVD
SUITE 21 W
FORT MYERS, FL 33907 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: STEVEN D. COHEN PSY.D.

01/07/2010

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P
Name: COHEN, STEVEN D PSY.D.
Address: 12587 NEW BRITTANY BLVD., SUITE 21 W
City-St-Zip: FORT MYERS, FL 33907

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: STEVEN D. COHEN, PSY.D.

P

01/07/2010

Electronic Signature of Signing Officer or Director

Date