

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000001952

FILED
Mar 27, 2012
Secretary of State

Entity Name: PSYMORE RESEARCH INSTITUTE, INC.

Current Principal Place of Business:

15622 BEAR CREEK DR.
TAMPA, FL 33624

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 340464
TAMPA, FL 33694

New Mailing Address:

FEI Number: 68-0623278

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HAGEMAN, SHERIDAN L.
15622 BEAR CREEK DR.
TAMPA, FL 33624 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

OFFICERS AND DIRECTORS:

Title: DP
Name: HALL, TRIESTA E
Address: 14842 WATER LOCUST DR
City-St-Zip: ORLANDO, FL 32828

Title: DS
Name: BARTHLE, JANE A
Address: 15501 BELLAMY BROTHERS BLVD.
City-St-Zip: DADE CITY, FL 33523

Title: DT
Name: HAGEMAN, SHERIDAN L.
Address: 15622 BEAR CREEK DR.
City-St-Zip: TAMPA, FL 33624

Title: DA
Name: HAGEMAN, DOUGLAS
Address: 4127 QUAIL BRIAR DR
City-St-Zip: VALRICO, FL 32594

Title: DM
Name: HALL, SHAWN
Address: 12904 RAINFORREST ST..
City-St-Zip: TAMPA, FL 33617

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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: SHERIDAN HAGEMAN

TRES

03/27/2012

Electronic Signature of Signing Officer or Director

Date