2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 29, 2011
Secretary of State

DOCUMENT# N07000008314

Entity Name: THE AMERICAN COLLEGE OF PROFESSIONAL NEUROPSYCHOLOGY, INC.

Current Principal Place of Business:

7800 S.W. 57TH AVENUE
SUITE 310
SOUTH MIAMI, FL 33143

New Principal Place of Business:

Current Mailing Address:

7800 S.W. 57TH AVENUE
SUITE 310
SOUTH MIAMI, FL 33143

New Mailing Address:

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

Name and Address of Current Registered Agent:

CROWN, BARRY M
7800 S.W. 57TH AVENUE
SUITE 310
SOUTH MIAMI, FL 33143 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: D
Name: CROWN, BARRY M
Address: 7800 S.W. 57TH AVENUE, SUITE 310
City-St-Zip: SOUTH MIAMI, FL 33143

Title: D
Name: SEWICK, BRADLEY G
Address: 26555 EVERGREEN ROAD, SUITE 830
City-St-Zip: SOUTHFIELD, MI 48076

Title: D
Name: LOWENTHAL, SHERYL J
Address: 9130 S. DADELAND BOULEVARD, SUITE 1511
City-St-Zip: MIAMI, FL 33156

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: BARRY M CROWN D 04/29/2011
Electronic Signature of Signing Officer or Director — Date