FILED 2002 UNIFORM BUSINESS REPORT (UBR) May 19, 2002 8:00 am **DOCUMENT # N47703** Secretary of State 1. Entity Name SUNCOAST PSYCHOANALYTIC ASSOCIATION, INC. 05-19-2002 90025 015 ****61.25 Mailing Address Principal Place of Business 1850 LEE ROAD, SUITE 103 1850 LEE ROAD, SUITE 103 WINTER PARK FL 32789 WINTER PARK FL 32789 US 3. Mailing Address 2. Principal Place of Business DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For 4. FEI Number City & State 59-3122501 Not Applicable City & State \$8.75 Additional Country 5. Certificate of Status Desired Zip Fee Required Country Zip -7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Player, William Street Address (P.O. Box Number is Not Acceptable) 1850 Lee Road, Suite 103 HASELWOOD, TOM Winter 1850 LEE ROAD, SUITE 103 WINTER PARK FL 32789 Winter Park 8. 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. 4/23/02 William Player Signature, typed or printed name of registered agent and title if applicable. Make Check Payable to \$5.00 May Be 9. Election Campaign Financing **Department of State** Added to Fees FILE NOW: FEE IS \$61.25 Trust Fund Contribution. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. OFFICERS AND DIRECTORS Change 10. TITLE Delete TITLE Dalsemer, Patrick NAME HASELWOOD, TOM NAME 1850 Lee Road, 103 STREET ADDRESS 1850 LEE RD., #103 STREET ADDRESS Winter Park, FL 32789 CITY-ST-ZIP WINTER PARK FL 32789 Addition CITY-ST-ZIP ▼ Change TITLE PD ☐ Delete TITLE NAME PLAYER, WILLIAM STREET ADDRESS 1850 LEE ROAD 103 STREET ADDRESS CITY-ST-ZIP WINTER PARK FL 32789 CITY-ST-ZIP (X) Change Addition ∇D TITLE ☐ Delete TITLE NAME WIENER, ERIC NAME STREET ADDRESS 7353 WEST SANDLAKE ROAD STREET ADDRESS CITY-ST-ZIP ORLANDO FL 32819 ☐ Addition X Change CITY-ST-ZIP TITLE ☐ Delete TITLE NAME PETITH, MONICA NAME 1850 Lee Road, 234 STREET ADDRESS 1850 LEE ROAD, 103 STREET ADDRESS Winter Park, FL 32789 CITY-ST-ZIP WINTER PARK FL 32789 Change X Addition CITY-ST-ZIP TITLE Additi@Pflete TITLE Davis, Leif NAME Hansen, Susan NAME 7353 West Sandlake Road STREET ADDRESS 7353 West SandLake Road STREET ADDRESS CITY-ST-ZIP Orlando, FL 32819 Addition Winter Park, FL 32819 CITY-ST-ZIP ☐ Change TITLE Delete

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

NAME

STREET ADDRESS

TITLE

NAME

4-23-02

1850 Lee Road, 103

Turner, Sean