

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000055498

FILED
Mar 22, 2007
Secretary of State

Entity Name: SPECIALIZED TREATMENT AND ASSESSMENT RESOURCES, P.A.

Current Principal Place of Business:

62 INDIAN TRACE, NO. 223
WESTON, FL 33326

New Principal Place of Business:

10242 NW 47TH STREET
SUITE # 34
SUNRISE, FL 33351

Current Mailing Address:

POB 267458
WESTON, FL 33326

New Mailing Address:

FEI Number: 65-1013384

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

COHN, ALAN B
2021 TYLER STREET
HOLLYWOOD, FL 33020 US

Name and Address of New Registered Agent:

COHN, ALAN B
TRADE CENTRE SOUTH, SUITE 700
100 WEST CYPRESS CREEK ROAD
FORT LAUDERDALE, FL 33309 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: ALAN B. COHN, ESQ.

03/22/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: IMHOF, ERIC A PSYD.
Address: 62 INDIAN TRACE, NO. 223
City-St-Zip: WESTON, FL 33326

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: IMHOF, ERIC A PSYD.
Address: 10242 NW 47TH STREET, SUITE # 34
City-St-Zip: SUNRISE, FL 33351

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: ERIC A. IMHOF, PSYD.

D

03/22/2007

Electronic Signature of Signing Officer or Director

Date