

2001 UNIFORM BUSINESS REPORT (UBR)

0050428 AV

DOCUMENT # P00000111466

1. Entity Name
PHOENIX PSYCHOLOGICAL SERVICES, INC.

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

01 AUG -2 PM 12:50

Principal Place of Business
4471 NW 36TH STREET STE 208
MIAMI FL 33166

Mailing Address
4471 NW 36TH STREET STE 208
MIAMI FL 33166



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-1060980

Applied For

Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

CUSHMAN, WILLIAM

4471 NW 36TH STREET STE 208

MIAMI FL 33166

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so.
(See criteria on back) ☐

FILE NOW!!! FEE IS \$550.00
After September 12, 2001 Fee will be \$750.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition
DP
Cushman, William
4471 NW 36th St, Suite 208
Miami, FL 33166

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition
S
Linda Gork-Cushman
4471 NW 36th St, Suite 208
Miami, FL 33166

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition
500004534815--3
-08/15/01--01005--003
***\$150.00 ***\$150.00

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

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STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
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STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

13. 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 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: William A. Cushman 7/23/01 305 888 1004
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #
954 435-7676

CR2E034 (5/01)



Attachment
P0000511466

William Cushman, Psy.D.
Clinical Psychologist
FL LIC. # PY0005576
Executive Director


7/23/01

To Whom It May Concern:

Regarding my failure to file my Uniform Business Report on a timely basis, I offer the following explanation. I am unable to find the original request to file and can only surmise that the form was lost during the transition of the business from it's previous ownership to it's current status. The previous business had a very similar name (Phoenix Psychological Associates) and there has been more than one instance of our mail being confused and finding its way into the hands of the previous owner. As a first time business owner, I was unaware of this annual requirement so had no reason to think anything was amiss until I received the current form and its subsequent penalty.

I respectfully request that you accept my check for \$150.00 as payment in full and forgive, this one time, the \$400.00 penalty. I can assure you than I am now fully aware of this annual requirement and that mistakes due to the transition from the old entity to the present entity are no longer an issue. There will be no such errors in the future. Please advise me of your decision at your earliest possible convenience.

Sincerely,


William H. Cushman, Psy.D.