2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 08, 2006
Secretary of State

DOCUMENT# P00000114868

Entity Name: HOLISTIC PSYCHOLOGICAL SERVICES, INC.

Current Principal Place of Business:

2880 CAPITAL MEDICAL BLVD.
SUITE 2
TALLAHASSEE, FL 32308

New Principal Place of Business:

3620 SHAMROCK WEST
TALLAHASSEE, FL 32309

Current Mailing Address:

2880 CAPITAL MEDICAL BLVD.
SUITE 2
TALLAHASSEE, FL 32308

New Mailing Address:

PO BOX 12806
TALLAHASSEE, FL 32317

FEI Number: 59-3686130 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SCOTT, JOHN W
2880 CAPITAL MEDICAL BLVD.
SUITE 2
TALLAHASSEE, FL 32308 US

Name and Address of New Registered Agent:

SCOTT, JOHN W
3620 SHAMROCK WEST
TALLAHASSEE, FL 32309 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: JOHN W SCOTT 03/08/2006
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: SCOTT, JOHN W PH.D.
Address: 3778 SUFFOLK DR
City-St-Zip: TALLAHASSEE, FL 32309

Title: T ( ) Delete
Name: SCOTT, CHERYL
Address: 3778 SUFFOLK DR
City-St-Zip: TALLAHASSEE, FL 32309

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

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: JOHN W. SCOTT PH.D P 03/08/2006
Electronic Signature of Signing Officer or Director Date