

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000000326

FILED
Mar 18, 2011
Secretary of State

Entity Name: SYNAPSE PSYCHIATRIC SERVICES, INC.

Current Principal Place of Business:

8720 N KENDALL DRIVE
SUITE 211
MIAMI, FL 33176 US

New Principal Place of Business:

Current Mailing Address:

8720 N KENDALL DRIVE
SUITE 211
MIAMI, FL 33176 US

New Mailing Address:

FEI Number: 04-3588032

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BIENIEK, SHERRIE A
8720 N KENDALL DRIVE
MIAMI, FL 33176 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: P
Name: BIENIEK, SHERRIE A
Address: 8720 N KENDALL DRIVE
City-St-Zip: MIAMI, FL 33176

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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: SHERRIE A BIENIEK

P

03/18/2011

Electronic Signature of Signing Officer or Director

Date