

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000051049

FILED  
Jul 15, 2005  
Secretary of State

Entity Name: JOSHUA G. MYERS, PSY.D., P.A.

## Current Principal Place of Business:

6084 TIMBERWOOD CIRCLE UNIT 324  
FORT MYERS, FL 33908

## New Principal Place of Business:

6150 DIAMOND CENTRE COURT  
SUITE 1003  
FORT MYERS, FL 33912

## Current Mailing Address:

6084 TIMBERWOOD CIRCLE UNIT 324  
FORT MYERS, FL 33908

## New Mailing Address:

7768 WOODLAND BEND CIRCLE  
FORT MYERS, FL 33912

FEI Number: 75-3054587

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

MYERS, JOSHUA G  
6084 TIMBERWOOD CIRCLE UNIT 324  
FORT MYERS, FL 33908 US

## Name and Address of New Registered Agent:

MYERS, JOSHUA G  
7768 WOODLAND BEND CIRCLE  
FORT MYERS, FL 33912 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: JOSHUA G. MYERS

07/15/2005

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: DP ( ) Delete  
Name: MYERS, JOSHUA G  
Address: 6084 TIMBERWOOD CIRCLE UNIT 324  
City-St-Zip: FORT MYERS, FL 33908

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DR (X) Change ( ) Addition  
Name: MYERS, JOSHUA G  
Address: 7768 WOODLAND BEND CIRCLE  
City-St-Zip: FORT MYERS, FL 33912

I hereby certify that the information supplied with this filing does not qualify for the 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 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: JOSHUA G. MYERS

DR

07/15/2005

Electronic Signature of Signing Officer or Director

Date