

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000088849

**FILED**  
**Jun 12, 2012**  
**Secretary of State**

**Entity Name:** REBECCA STEVENS RUSTINE PSY. D. PA

**Current Principal Place of Business:**

5099 NORTH HIGHWAY A1A  
SUITE 101  
VERO BEACH, FL 32963 US

**New Principal Place of Business:**

**Current Mailing Address:**

5099 NORTH HIGHWAY A1A  
SUITE 101  
VERO BEACH, FL 32963 US

**New Mailing Address:**

**FEI Number:** 36-4503833

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

RUSTINE, REBECCA S  
3055 CARDINAL DRIVE  
SUITE 101  
VERO BEACH, FL 32963 US

**Name and Address of New Registered Agent:**

RUSTINE, REBECCA S  
5099 HIGHWAY A1A  
SUITE 101  
VERO BEACH, FL 32963 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:** REBECCA S. RUSTINE

06/12/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

**Title:** PSY  
**Name:** RUSTINE, REBECCA S  
**Address:** 5099 HIGHWAY A1A SUITE 101  
**City-St-Zip:** VERO BEACH, FL 32963

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:** REBECCA S. RUSTINE

DR.

06/12/2012

Electronic Signature of Signing Officer or Director

Date