2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000095009

FILED May 05, 2006 Secretary of State

Entity Name: PINELLAS PSYCHOTHERAPY ASSOCIATES, INC.

Current Principal Place of Business:		New Principal Place of Business:		
938 SOU LEARW <i>A</i>	LE RD ATER, FL 337	59		
Current Mailing Address:		ss:	New Mailing Address:	
938 SOU LEARW <i>I</i>	LE RD ATER, FL 337	59		
El Number	20-0189484	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()
ame and	Address of C	Current Registered Agent:	Name and Address of	of New Registered Agent:
	A, JAMES L			
	LÉ RD ATER, FL 337	59 US		
LEARWA	LE RD ATER, FL 337		purpose of changing its registere	ed office or registered agent, or both,
LEARWA	LE RD ATER, FL 337 named entity of Florida. RE:	submits this statement for the		ed office or registered agent, or both,
LEARWA	LE RD ATER, FL 337 named entity of Florida. RE:			ed office or registered agent, or both, Date
LEARWA ne above the State IGNATUI accordan	LE RD ATER, FL 337 named entity of Florida. RE: Electror ce with s. 607.19	submits this statement for the nic Signature of Registered Agos(2)(b), F.S., the corporation did n	ent	
LEARWA he above the State IGNATUI accordan ection Car	LE RD ATER, FL 337 named entity of Florida. RE: Electror ce with s. 607.19	submits this statement for the nic Signature of Registered Agos(2)(b), F.S., the corporation did ng Trust Fund Contribution ().	ent ot receive the prior notice.	
LEARWA ne above the State GNATUR accordan ection Car	LE RD ATER, FL 337 named entity of Florida. RE: Electror ce with s. 607.19 npaign Financin S AND DIREC	submits this statement for the nic Signature of Registered Ag (2)(b), F.S., the corporation did n g Trust Fund Contribution (). ETORS:) Delete MES L	ent ot receive the prior notice.	Date
ne above the State GNATUI accordancection Car FFICER: le:	LE RD ATER, FL 337 named entity e of Florida. RE: Electror ce with s. 607.19 mpaign Financin S AND DIREC D (WASENDA, JA 1938 SOULE F CLEARWATER	submits this statement for the nic Signature of Registered Ag (3(2)(b), F.S., the corporation did n g Trust Fund Contribution (). ETORS:) Delete MES L RD R, FL 33759) Delete RIQUE RD	ent ot receive the prior notice. ADDITIONS/CHANGI Title: Name: Address:	Date ES TO OFFICERS AND DIRECTOR

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: MONIQUE DUGUAY D 05/05/2006