

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000049905

**FILED**  
**Feb 20, 2011**  
**Secretary of State**

**Entity Name:** ALLISON B. VANDENHOUTEN, PSY.D., P.A.

**Current Principal Place of Business:**

1640 TOWN CENTER CIRCLE  
SUITE 204  
WESTON, FL 33326 US

**New Principal Place of Business:**

**Current Mailing Address:**

278 SW 159TH AVENUE  
SUNRISE, FL 33326 US

**New Mailing Address:**

11850 NW 18TH CT  
PLANTATION, FL 33323 US

FEI Number: 20-2640969

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

VANDENHOUTEN, ALLISON B  
1640 TOWN CENTER CIR  
204  
WESTON, FL 33326 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: VANDENHOUTEN, ALLISON B  
Address: 11850 NW 18TH CT  
City-St-Zip: PLANTATION, FL 33323 US

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: ALLISON B. VANDENHOUTEN

PRES

02/20/2011

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date