2012 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 07, 2012
Secretary of State

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Entity Name: TOBI N. GILBERT, PSY.D., P.A.

Current Principal Place of Business:

10024 45TH WAY NORTH
PINELLAS PARK, FL 34882

New Principal Place of Business:

10024 45TH WAY NORTH
PINELLAS PARK, FL 33782

Current Mailing Address:

10024 45TH WAY NORTH
PINELLAS PARK, FL 34882

New Mailing Address:

10024 45TH WAY NORTH
PINELLAS PARK, FL 33782

FEI Number: 20-8389764 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

GILBERT, TOBI N DR.
10024 45TH WAY NORTH
PINELLAS PARK, FL 34872 US

Name and Address of New Registered Agent:

GILBERT, TOBI N DR.
10024 45TH WAY NORTH
PINELLAS PARK, FL 33782 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: TOBI GILBERT, PSY.D. 01/07/2012
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: DR.
Name: GILBERT, TOBI N
Address: 302 WOODBERRY PLACE
City-St-Zip: JACKSONVILLE, NC 28540

Title: DR.
Name: GILBERT, TOBI N
Address: 302 WOODBERRY PLACE
City-St-Zip: JACKSONVILLE, NC 28540

Title: DR
Name: GILBERT, TOBI N
Address: 302 WOODBERRY PLACE
City-St-Zip: JACKSONVILLE, NC 28540

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: TOBI GILBERT, PSY.D. DR. 01/07/2012
Electronic Signature of Signing Officer or Director Date