2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000017193

FILED Mar 02, 2009 Secretary of State

Entity Name: FRIEDMAN PSYCHOLOGY GROUP, P.A. **Current Principal Place of Business: New Principal Place of Business:** 4421 HOLLYWOOD BLVD, SUITE 400 HOLLYWOOD, FL 33021 **Current Mailing Address: New Mailing Address:** 4421 HOLLYWOOD BLVD HOLLYWOOD, FL 33021 FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: DIAMOND, JASON A ESQ 4421 HOLLYWOOD BLVD HOLLYWOOD, FL 33021 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: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: (X) Change () Addition FRIEDMAN, ALISON DR. FRIEDMAN, ADAM DR. Name: Name: 19239 REDBERRY COURT 4421 HOLLYWOOD BLVD. Address: Address:

City-St-Zip: BOCA RATON, FL 33021 City-St-Zip: HOLLYWOOD, FL 33021

Title: (X) Delete Title: () Change () Addition

Name: FRIEDMAN, ADAM DR. Name: 19239 REDBERRY COURT Address: Address: BOCA RATON, FL 33498 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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.

Ρ SIGNATURE: ADAM FRIEDMAN 03/02/2009