

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P11000048764

Entity Name: BROWARD PSYCHOLOGICAL SERVICES, INC.

FILED
Apr 13, 2012
Secretary of State

Current Principal Place of Business:

12555 ORANGE DRIVE
SUITE 226
DAVIE, FL 33330

New Principal Place of Business:

1941 NW 150 AVENUE
SUITE 104
PEMBROKE PINES, FL 33028 US

Current Mailing Address:

12555 ORANGE DRIVE
SUITE 226
DAVIE, FL 33330

New Mailing Address:

1941 NW 150 AVENUE
SUITE 104
PEMBROKE PINES, FL 33028 US

FEI Number: 45-2495976

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GONZALEZ, ROSA M
12555 ORANGE DRIVE
SUITE 226
DAVIE, FL 33330 US

Name and Address of New Registered Agent:

GONZALEZ, ROSA M
1941 NW 150 AVENUE
SUITE 104
PEMBROKE PINES, FL 33028 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:

04/13/2012

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DIR.
Name: NUNEZ, JEANNIE C PSY.D.
Address: 1941 NW 150 AVENUE STE 104
City-St-Zip: PEMBROKE PINES, FL 33028 US

Title: DIR.
Name: SAS-GALVEZ, ANNJANNETTE PSY.D.
Address: 1941 NW 150 AVENUE STE 104
City-St-Zip: PEMBROKE PINES, FL 33028 US

Title: DIR
Name: GONZALEZ, ROSA M LMHC
Address: 1941 NW 150 AVENUE STE 104
City-St-Zip: PEMBROKE PINES, FL 33028 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: J NUNEZ

DIR

04/13/2012

Electronic Signature of Signing Officer or Director

Date