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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P93000029690

GULFCOAST PSYCHOLOGICAL ASSOCIATES, INC.

Suite, Apt. #, etc. 22						
NOKOMIS FL 34275 US 2. Principal Place of Business 2. Mailing Address 3. Mailing Address 4. FEI Number 55-04093/75 3. Date Incorporated or Qualified 04/21/1993 3. FEI Number 55-04093/75 3. South, ApJ. R. etc. 3. Sutile, A	Principal Place	e of Business	Mailing Address			•
US Components of Country Surface Surfac	0100 011021 1121 110110					
3. Date Incorporated or Qualified On/2/[1/983] Applied For John Piece of Business 2a. Mailing Address 4. FEI Number Section Status Desired New Applied For John Piece Suite, Apt. #, etc. 27 Suite, Apt. #, etc. 28 Suite, Apt. #, etc. 27 Suite, Apt. #, etc. 28 Suite, Apt. #, etc. 28 Suite, Apt. #, etc. 29 Sui					DO NOT WRITE IN TH	IS SPACE
2.	05		00		3. Date Incorporated or Qualifed	
Sulfa, Apt. #, eff.: Sulfa, Apt. #, eff.:					04/21/1993	
Sulle, Apt. 8; etc. Sulle, Apt. 8; etc.	2. Principal Pl	ace of Business	2a. Mailing Address			Applied For
Suite, Apt. #, etc. 22	21		26		65-0409375	
City & State Ci		#, etc.	Suite, Apt. #, etc.		5. Certifcate of Status Desired	
23	22					
21p Country Zip Country Zip Country Zip Country Representation owers the current year Intangible Division of Sections 807 0502 and 807 1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered difference or registered agent, or both, in the State of Florida, Such change was authorized by the corporation submits this statement for the purpose of changing its registered difference or registered agent, or both, in the State of Florida, Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered difference or registered agent, or both, in the State of Florida, Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered difference or registered agent, or both, in the State of Florida, Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered directors in the registered agent, the such provides and accept the corporation of ingeleated agent and the registered agent, the such provides are appointment as registered directors. I hereby accept the appointment as registered distincts. In the summary of provides and the registered agent and the registered agent, the registered agent, the registered agent, the purpose of directors. I hereby accept the appointment as registered agent, and the registered agent, the registered agent and the registered agent, the registered agent, the registered agent, the registered agent and the registered agent and the registered agent and the registered agent	<u> </u>	9				
Personal Property Tax Pers	23	Country		Country		
9. Name and Address of Current Registered Agent MORRIS, HARVEY A 3105 CASEY KEY ROAD NOKOMIS FL 34275 82 Street Address (F.O. Box Number is Not Acceptable) 83 Street Address (F.O. Box Number is Not Acceptable) 84 City FL 85 Zip Code 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent. I am familiar with, and accept the obligations of, Section 607.6505, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent. I am familiar with, and accept the obligations of, Section 607.6505, Florida Statutes. SIGNATURE SIGNATURE OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE OFFICERS AND DIRECTORS IN 12 12. TITLE OFFICERS AND DIRECTORS 13. TITLE ORAGE 14. STAME 23. NAME 23. STREET ADDRESS CITY-ST-2P TITLE ORAGE 14. TITLE ORAGE 14. TITLE ORAGE Addition NAME STREET ADDRESS CITY-ST-2P TITLE ORAGE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition Addition Addition Addition ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition Addition ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 CHANGES TO THE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 ADDITIONS/CHANGES TO OFFICERS AND DIRECT	· · ·			-n .	1	
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3105 CASEY KEY ROAD NOKOMIS FL 34275 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, or both, in the State of Florida, Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered office or registered agent, or both, in the State of Florida, Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, and familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or printed rainer of registered agent and time is appointment as registered agent agent are registered agent age	-	3. Name and Padress St Carr	<u> </u>	81 Name		
NOKOMIS FL 34275 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the Station of Florida, Such change was a submotested by the corporation's board of directors. I hereby accept the appointment as registered agent, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE SIGNATURE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. TITLE DPST DELETE 11 TITLE	MORRIS, HARVEY A			92 Street Addr	acc (P.O. Box Number is Not Accentable)	<u>.</u>
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered spent and time appointment as registered spent algorithment as registered spent algorithment as registered spent signature required whon remistating) Common	3105 CASEY KEY ROAD			82 Street Addin	ess (P.O. Box Number is Not Acceptable)	
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SIGNATURE Signature, typed or preted name of registered agent and title if applicables NOTE Registered Agent signature resigned when reinitating) DATE	l office or n	enistered agent or both in the Stat	te of Florida. Such change was aut	nonzeg by the corporatio	on's board of directors, I hereby accept the app	Outline it as registered
Control Cont] -					
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14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

941-966-6646