2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000055957

FILED
Feb 22, 2011
Secretary of State

Entity Name: RIVERSIDE PSYCHOLOGICAL GROUP, INC.

Current Principal Place of Business:

1801 UNIVERSITY DR
PENTHOUSE STE. A
CORAL SPRINGS, FL 33065

New Principal Place of Business:

1500 UNIVERSITY DR
SUITE 202
CORAL SPRINGS, FL 33071 US

Current Mailing Address:

1801 UNIVERSITY DR
PENTHOUSE STE. A
CORAL SPRINGS, FL 33065

New Mailing Address:

1500 UNIVERSITY DR
SUITE 202
CORAL SPRINGS, FL 33071 US

FEI Number: 65-0538345 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CIMINO, JOSEPH J PSY.D.
4445 EL MAR DRIVE #205
LAUD BY THE SEA, FL 33308 US

Name and Address of New Registered Agent:

CIMINO, JOSEPH J PSY.D.
4445 EL MAR DRIVE
APT #205
LAUD BY THE SEA, FL 33308 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: 02/22/2011
Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: DR.
Name: CIMINO, JOSEPH J DR.
Address: 1500 UNIVERSITY DR. , SUITE 202
City-St-Zip: CORAL SPRINGS, FL 33071 US

Title: DR
Name: CIMINO, JOSEPH
Address: 1500 UNIVERSITY DR. , SUITE 202
City-St-Zip: CORAL SPRINGS, L 33071 US

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Title: DR
Name: CIMINO, JOSEPH
Address: 1500 UNIVERSITY DR. , SUITE 202
City-St-Zip: CORAL SPRINGS, L 33071 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: JOSEPH J. CIMINO, PSY.D. OWNE 02/22/2011
Electronic Signature of Signing Officer or Director — Date