

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000063593

FILED
Feb 08, 2007
Secretary of State

Entity Name: HODAN PSYCHOLOGICAL SERVICES, P.A.

Current Principal Place of Business:

3745 5TH AVE NORTH
SAINT PETERSBURG, FL 33713 US

New Principal Place of Business:

3745 5TH AVE. N
SAINT PETERSBURG, FL 33713 US

Current Mailing Address:

P O BOX 86339
MADEIRA BEACH, FL 33708 US

New Mailing Address:

734 37TH AVE. NE
ST. PETERSBURGH, FL 33704 US

FEI Number: 59-3272356

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HODAN, GERALD J.
3745 5TH AVE NORTH
SAINT PETERSBURG, FL 33713 US

Name and Address of New Registered Agent:

HODAN, GERALD J.
734 37TH AVE. NE
SAINT PETERSBURG, FL 33704 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: GERALD J HODAN

02/08/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: HODAN, GERALD
Address: 16446 REDINGTON DRIVE
City-St-Zip: REDINGTON BEACH, FL 33708

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: HODAN, GERALD
Address: 734 37TH AV E. NE
City-St-Zip: ST. PETERSBURGH, FL 33704

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

SIGNATURE: GERALD J HODAN

PRES

02/08/2007

Electronic Signature of Signing Officer or Director

Date