


**FILED**  
**Mar 29, 1999 8:00 am**  
**Secretary of State**

03-29-1999 90009 018 \*\*\*150.00

<b>PROFIT CORPORATION ANNUAL REPORT 1999</b>		<b>FLORIDA DEPARTMENT OF STATE</b> <b>Katherine Harris</b> <b>Secretary of State</b> <b>DIVISION OF CORPORATIONS</b>
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**DOCUMENT # P96000022406**

1. Corporation Name

**JACKIE TWITCHELL-TAKAKI, PSY.D, P.A.**  
**-TAKAKI**

Principal Place of Business

**1400 ROYAL PALM SQUARE BLVD.**  
**SUITE 103**  
**FT. MYERS FL 33919**

Mailing Address

**1400 ROYAL PALM SQUARE BLVD.**  
**SUITE 103**  
**FT. MYERS FL 33919**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

03/08/1996

4. FEI Number

65-0649592

Applied For

Not Applicable

5. Certificate of Status Desired

☐

**\$8.75 Additional**  
**Fee Required**

6. Election Campaign Financing Trust Fund Contribution

☐

**\$5.00 May Be**  
**Added to Fees**

8. This corporation owes the current year Intangible Personal Property Tax.

☐

Yes

☒

No

2. Principal Place of Business

21 **1342 Colonial Blvd.**

Suite, Apt. #, etc.

22 **Bldg. F, Suite 43**

City &amp; State

23 **Ft. Myers, FL**24 **33907**

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2a. Mailing Address

26 **1342 Colonial Blvd.**

Suite, Apt. #, etc.

27 **Bldg. F, Suite 43**

City &amp; State

28 **Ft. Myers, FL**29 **33907**

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9. Name and Address of Current Registered Agent

**TWITCHELL-TAKAKI, JACKIE**  
**1400 ROYAL PALM SQUARE BLVD.**  
**SUITE 103**  
**FT. MYERS FL 33919**

10. Name and Address of New Registered Agent

81 Name

82 **Jackie Twitchell-Takaki**

82 Street Address (P.O. Box Number is Not Acceptable)

83 **1342 Colonial Blvd**84 **Bldg F, Suite 43**

City

85 **Ft. Myers**

FL

86 Zip Code

87 **33907**

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 agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE **P** ☐ DELETE  
 NAME **TWITCHELL-TAKAKI, JACKIE**  
 STREET ADDRESS **1400 ROYAL PALM SQUARE BLVD, SUITE 103**  
 CITY-ST-ZIP **FT-MYERS FL**

TITLE ☐ DELETE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☐ DELETE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☐ DELETE  
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TITLE ☐ DELETE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☐ DELETE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition  
 1.2 NAME **Jackie Twitchell-Takaki**  
 1.3 STREET ADDRESS **1342 Colonial Blvd. Bldg F, Suite 43**  
 1.4 CITY-ST-ZIP **Ft. Myers, FL 33907**

2.1 TITLE ☐ Change ☐ Addition  
 2.2 NAME  
 2.3 STREET ADDRESS  
 2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition  
 3.2 NAME  
 3.3 STREET ADDRESS  
 3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition  
 4.2 NAME  
 4.3 STREET ADDRESS  
 4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition  
 5.2 NAME  
 5.3 STREET ADDRESS  
 5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition  
 6.2 NAME  
 6.3 STREET ADDRESS  
 6.4 CITY-ST-ZIP

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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**Jackie Twitchell-Takaki**

3/11/99

Date

941-275-7761

Daytime Phone #