## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## **DOCUMENT # P96000102332**

1. Entity Name

JENNIFER J. FERRELL-HANINGTON, PSY.D., P.A.

FILED Feb 12, 2007 08:00 AM Secretary of State

Principal Place of Business

D

**SIGNATURE** 

2101 PARK CENTER DR., #270 ORLANDO, FL 32835

Mailing Address

2101 PARK CENTER DR., #270 STE. 270

ORLANDO, FL 32835



CR2E034 (11/05)

O NOT WRITE IN THIS SPACE	01112007 No Origin Orizzoot (11700)			
	4. FEI Number	Applied For		
	59-3415824	Not Applicab		
	5. Certificate of Status Desired	\$8.75 Additional Fee Required		
C No. and Colonia Consideration of Consideration	•			

6. Name and Address of Current Registered Agent

FERRELL-HANNINGTON, JENNIFER J 1529 GRASSY RIDGE LANE APOPKA, FL 32712

## DO NOT WRITE IN THIS SPACE

SIGNATURE						
SIGNATURE.	Signature, typed or printed name of registered agent and title	f applicable. (NOTE: Re	gistered Agent signature	required when remetating)	DATE	
	E NOWIII FEE IS \$150.00 ay 1, 2007 Fee will be \$550.00	Election Campaign     Trust Fund Contribu		\$5.00 May Be Added to Fees	,	
10.	OFFICERS AND DIREC	TORS				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D FERRELL-HANINGTON, JENNIFER J 1529 GRASSY RIDGE LANE APOPKA, FL 32712				U00000633659 02/21/07-80071-006 150.00	
HILE NAME STREET ADDRESS CITY-ST-ZIP					02/21/01-80011-006 130.00	
TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO	NOT WRITE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN THIS SPACE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP						
TITLE NAME STREET ADDRESS CITY-ST-ZIP						
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other tike empowered.						

8. 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. I am familiar with, and accept