2011 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 20, 2011
Secretary of State

DOCUMENT# P97000001104

Entity Name: SOUTH FLORIDA PSYCHIATRIC SERVICES INC.

Current Principal Place of Business:

2225 N. UNIVERSITY DRIVE
PEMBROKE PINES, FL 33024

New Principal Place of Business:

2225 N. UNIVERSITY DRIVE
PEMBROKE PINES, FL 33024 US

Current Mailing Address:

2225 N. UNIVERSITY DRIVE
PEMBROKE PINES, FL 33024

New Mailing Address:

2225 N. UNIVERSITY DRIVE
PEMBROKE PINES, FL 33024 US

FEI Number: 65-0738801 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

DE FILIPPO, ANTONIO F M.D.
2225 N. UNIVERSITY DRIVE
PEMBROKE PINES, FL 33024 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: PRES
Name: DE FILIPPO, ANTONIO F MD
Address: 2225 N. UNIVERSITY DR
City-St-Zip: PEMBROKE PINES, FL 33024 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: ANTONIO DE FILIPPO PRES 02/20/2011

Electronic Signature of Signing Officer or Director — Date