

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000058906

FILED
Feb 03, 2007
Secretary of State

Entity Name: GERALD L. TODOROFF, PSY.D. P.A.

Current Principal Place of Business:

5465
COMMERCIAL WAY
SPRING HILL, FL 34606 US

New Principal Place of Business:

Current Mailing Address:

28053 OLD TRILBY RD.
BROOKSVILLE, FL 34602

New Mailing Address:

FEI Number: 59-3453723 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TODOROFF, GERALD
28053 OLD TRILBY RD.
BROOKSVILLE, FL 34602 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DPT () Delete
Name: TODOROFF, GERALD L
Address: 28053 OLD TRILBY RD.
City-St-Zip: BROOKSVILLE, FL 34602

Title: VS () Delete
Name: EVANS, RONNIE J.
Address: 28053 OLD TRILBY ROAD
City-St-Zip: BROOKSVILLE, FL 34602

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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 L. TODOROFF

DPT

02/03/2007

Electronic Signature of Signing Officer or Director

Date