

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000001895

FILED
Sep 16, 2005
Secretary of State

Entity Name: PSYCOLOGICAL ASSOCIATES OF THE PALM BEACHES, INC.

Current Principal Place of Business:

74 NE 4TH AVE
#4
DELRAY BEACH, FL 33483 US

New Principal Place of Business:

Current Mailing Address:

74 NE 4TH AVE
#4
DELRAY BEACH, FL 33483 US

New Mailing Address:

FEI Number: 65-0818129 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

COSTANZA, SCOTT
3692 MOOD BAY CIRCLE
WELLINGTON, FL 33414 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: COSTANZA, SCOTT
Address: 74 NE 4TH AVENUE #4
City-St-Zip: DELRAY BEACH, FL 33483

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D/P (X) Change () Addition
Name: COSTANZA, SCOTT
Address: 74 NE 4TH AVENUE #4
City-St-Zip: DELRAY BEACH, FL 33483

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: SCOTT COSTANZA

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09/16/2005

Electronic Signature of Signing Officer or Director

Date