

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000091150

**FILED**  
**Mar 12, 2007**  
**Secretary of State**

**Entity Name:** TERESA F. PARNELL, PSY.D, P.A.

**Current Principal Place of Business:**

121 W. SYBELIA AVENUE  
MAITLAND, FL 32751 US

**New Principal Place of Business:**

**Current Mailing Address:**

121 W. SYBELIA AVENUE  
MAITLAND, FL 32751 US

**New Mailing Address:**

**FEI Number:** 59-3538864

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

**Name and Address of Current Registered Agent:**

PARNELL, TERESA  
1750 THUNDERBIRD TRAIL  
MAITLAND, FL 32751 US

**Name and Address of New Registered Agent:**

PARNELL, TERESA  
100 WOODSTREAM COURT  
MAITLAND, FL 32751 US

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:**

03/12/2007

Electronic Signature of Registered Agent

Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: PARNELL, TERESA F  
Address: 1750 THUNDERBIRD TRAIL  
City-St-Zip: MAITLAND, FL 32751

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: D (X) Change ( ) Addition  
Name: PARNELL, TERESA F  
Address: 100 WOODSTREAM COURT  
City-St-Zip: MAITLAND, FL 32751

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:** TERESA F. PARNELL

D

03/12/2007

Electronic Signature of Signing Officer or Director

Date