2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 28, 2009
Secretary of State

DOCUMENT# P99000067048

Entity Name: PSYCHOTHERAPUTIC ARTS INSTITUTE INC.

Current Principal Place of Business:

1384-54TH AVE NE
SAINT PETERSBURG, FL 33703

New Principal Place of Business:

1384-54TH AVE NE
SAINT PETERSBURG, FL 33703 US

Current Mailing Address:

PO BOX 55368
SAINT PETERSBURG, FL 33732

New Mailing Address:

PO BOX 55368
SAINT PETERSBURG, FL 33732 US

FEI Number: 59-3591937 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

WINEBRENNER, JM
1384 54TH AVE NE
SAINT PETERSBURG, FL 33703 US

Name and Address of New Registered Agent:

WINEBRENNER, J M
1384 54TH AVE NE
SAINT PETERSBURG, FL 33703 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: JM WINEBRENNER 03/28/2009
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: FORET, MARY
Address: 4201 WILLOW PARK DR.
City-St-Zip: ORLANDO, FL 328352563

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: FORET, MARY DR
Address: 4201 WILLOW PARK DR.
City-St-Zip: ORLANDO, FL 328352563 US

I hereby certify that the information supplied with this filing does not qualify 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: JACK WINEBRENNER RA 03/28/2009
Electronic Signature of Signing Officer or Director Date