2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 24, 2009
Secretary of State

DOCUMENT# P99000080999

Entity Name: MICHAEL C. RIORDAN, PSY. D., P.A.

Current Principal Place of Business:

2107 S. 10TH STREET
FORT PIERCE, FL 349505318

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 3757
FORT PIERCE, FL 349483757

New Mailing Address:

FEI Number: 65-0952338 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

RIORDAN, LUCY
213 MARINA DRIVE
FORT PIERCE, FL 34949 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: DIR ( ) Delete
Name: RIORDAN, MICHAEL C PSYD
Address: 213 MARINA DR
City-St-Zip: FORT PIERCE, FL 34949

Title: RA ( ) Delete
Name: RIORDAN, LUCY
Address: 213 MARINA DR
City-St-Zip: FORT PIERCE, FL 34949

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 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: MICHAEL C. RIORDAN DIR 03/24/2009

Electronic Signature of Signing Officer or Director — Date