2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# V56945

FILED Jan 05, 2004 Secretary of State

Entity Name: MEDPSYCH CORPORATION OF CENTRAL FLORIDA

Current Principal Place of Business:			New Principal Plac	New Principal Place of Business:	
	M COAST PKW	Y N.W.			
#5 PALM CO	AST, FL 32137				
	Mailing Addres		New Mailing Addre	?SS:	
	M COAST PKW		•		
# 5					
	AST, FL 32137				
FEI Number	: 58-2012737	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and	d Address of C	urrent Registered Agent:	Name and Address	of New Registered Agent:	
	O CHARTER S	ERVICES INC.			
	NOLIA AVE. A BEACH, FL 3	2114 US			
	1 121				
-			nurnaca at chandina ite radietai	red office or registered agent, or both,	
	e named entity s e of Florida.	ubilitis tilis statement for the	purpose or changing its register		
n the Stat	e of Florida.	ubilitis tills statement for the	pulpose of changing its register		
	e of Florida. RE:	ic Signature of Registered Ag		Date	
n the Stat SIGNATU	e of Florida. RE: Electroni				
n the Stat SIGNATU Election Ca	e of Florida. RE: Electroni	ic Signature of Registered Ag Trust Fund Contribution ().	ent		
n the Stat SIGNATU Election Ca OFFICER Title:	e of Florida. RE: Electroni mpaign Financing S AND DIRECT DV ()	ic Signature of Registered Ag Trust Fund Contribution (). TORS: Delete	ent ADDITIONS/CHANG	Date	
n the Stat SIGNATU Election Ca OFFICER Fitle: Name:	e of Florida. RE: Electroni mpaign Financing S AND DIRECT DV () SILVAIN, PETER	ic Signature of Registered Ag Trust Fund Contribution (). TORS: Delete	ent ADDITIONS/CHAN Title: Name:	Date GES TO OFFICERS AND DIRECTOR	
n the Stat SIGNATU Election Ca OFFICER Fitle: Name: Address:	e of Florida. RE: Electroni mpaign Financing S AND DIRECT DV () SILVAIN, PETER	ic Signature of Registered Ag Trust Fund Contribution (). TORS: Delete R B AST PARKWAY, N.W. STE. 5	ent ADDITIONS/CHANG	Date GES TO OFFICERS AND DIRECTOR	
n the Stat SIGNATU Election Ca OFFICER Fitle: Name: Address: City-St-Zip:	e of Florida. RE: Electroni mpaign Financing S AND DIRECT DV () SILVAIN, PETER 4984 PALM COAST, F	ic Signature of Registered Ag Trust Fund Contribution (). TORS: Delete R B AST PARKWAY, N.W. STE. 5	ent ADDITIONS/CHANG Title: Name: Address:	Date GES TO OFFICERS AND DIRECTOR	
n the Stat BIGNATU Election Ca OFFICER Fitle: Name: Address: City-St-Zip: Fitle: Name:	e of Florida. RE: Electroni mpaign Financing S AND DIRECT DV () SILVAIN, PETER 4984 PALM COAST, F DP () SILVAIN, PAMEI	ic Signature of Registered Ag Trust Fund Contribution (). FORS: Delete R B AST PARKWAY, N.W. STE. 5 EL Delete LA J	ent ADDITIONS/CHANGE Title: Name: Address: City-St-Zip: Title: Name:	Date GES TO OFFICERS AND DIRECTOR () Change () Addition	
n the Stat SIGNATU Election Ca	e of Florida. RE: Electroni mpaign Financing S AND DIRECT DV () SILVAIN, PETER 4984 PALM COAST, F DP () SILVAIN, PAMEI	ic Signature of Registered Ag Trust Fund Contribution (). FORS: Delete R B AST PARKWAY, N.W. STE. 5 L Delete LA J AST PARKWAY, N.W. STE. 5	ent ADDITIONS/CHANG Title: Name: Address: City-St-Zip: Title:	Date GES TO OFFICERS AND DIRECTOR () Change () Addition	
n the Stat SIGNATU Election Ca OFFICER Fitle: Name: Address: City-St-Zip: Fitle: Name: Address: City-St-Zip:	e of Florida. RE: Electroni mpaign Financing S AND DIRECT DV () SILVAIN, PETER 4984 PALM COAST, F DP () SILVAIN, PAMEI 4984 PALM COAST, F PALM COAST, F	Trust Fund Contribution (). FORS: Delete R B AST PARKWAY, N.W. STE. 5 EL Delete LA J AST PARKWAY, N.W. STE. 5	ent ADDITIONS/CHANG Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip:	Date GES TO OFFICERS AND DIRECTOR () Change () Addition () Change () Addition	
n the Stat SIGNATU Election Ca OFFICER Fitle: Name: Address: City-St-Zip: Fitle: Name: Address: City-St-Zip: Fitle: City-St-Zip: Fitle:	e of Florida. RE: Electroni mpaign Financing S AND DIRECT DV () SILVAIN, PETER 4984 PALM COAST, F DP () SILVAIN, PAMEI 4984 PALM COAST, F PALM COAST, F	ic Signature of Registered Ag Trust Fund Contribution (). FORS: Delete R B AST PARKWAY, N.W. STE. 5 EL Delete LA J AST PARKWAY, N.W. STE. 5 EL Delete Delete Delete Delete Delete Delete Delete Delete Delete	ent ADDITIONS/CHANG Title: Name: Address: City-St-Zip: Title: Name: Address:	Date GES TO OFFICERS AND DIRECTOR () Change () Addition	
n the Stat BIGNATU Election Ca DFFICER Fitle: Name: Address: Dity-St-Zip: Fitle: Name: Address: Dity-St-Zip: Fitle: Name: Address: Name: Address:	e of Florida. RE: Electroni mpaign Financing S AND DIRECT DV () SILVAIN, PETEF 4984 PALM COAST, F DP () SILVAIN, PAMEI 4984 PALM COAST, F S () REILLEY, PETE 4984 PALM COAST	ic Signature of Registered Ag Trust Fund Contribution (). TORS: Delete R B AST PARKWAY, N.W. STE. 5 EL Delete LA J AST PARKWAY, N.W. STE. 5 EL Delete R AST PARKWAY, N.W. STE. 5	ent ADDITIONS/CHANG Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip: Title: Name: Address: Address: City-St-Zip:	Date GES TO OFFICERS AND DIRECTOR () Change () Addition () Change () Addition	
n the Stat SIGNATU Election Ca OFFICER Fitle: Name: Address: City-St-Zip: Fitle: Name: Address:	e of Florida. RE: Electroni mpaign Financing S AND DIRECT DV () SILVAIN, PETEF 4984 PALM COAST, F DP () SILVAIN, PAMEI 4984 PALM COAST, F S () REILLEY, PETE	ic Signature of Registered Ag Trust Fund Contribution (). TORS: Delete R B AST PARKWAY, N.W. STE. 5 EL Delete LA J AST PARKWAY, N.W. STE. 5 EL Delete R AST PARKWAY, N.W. STE. 5	ent ADDITIONS/CHANG Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip:	Date GES TO OFFICERS AND DIRECTOR () Change () Addition () Change () Addition	
n the Stat SIGNATU Election Ca OFFICER Fitle: Name: Address: City-St-Zip: Fitle: Name: Address: City-St-Zip: Fitle: Name: City-St-Zip: Fitle: Name: Address: City-St-Zip: Fitle: Name: Address: City-St-Zip: Fitle:	e of Florida. RE: Electroni mpaign Financing S AND DIRECT DV () SILVAIN, PETEF 4984 PALM COAST, F DP () SILVAIN, PAMEI 4984 PALM COAST, F S () REILLEY, PETE 4984 PALM COAST, F T ()	ic Signature of Registered Ag Trust Fund Contribution (). FORS: Delete R B AST PARKWAY, N.W. STE. 5	ent ADDITIONS/CHANG Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip:	Date GES TO OFFICERS AND DIRECTOR () Change () Addition () Change () Addition	
n the Stat SIGNATU Election Ca OFFICER Fitle: Name: Address: City-St-Zip: Fitle: Name: Address: City-St-Zip: Fitle: Name: City-St-Zip: City-St-Zip:	e of Florida. RE: Electroni mpaign Financing S AND DIRECT DV () SILVAIN, PETEF 4984 PALM COV PALM COAST, F DP () SILVAIN, PAMEI 4984 PALM COV PALM COAST, F S () REILLEY, PETE 4984 PALM COV PALM COAST, F T () SILVAIN, PAMEI	ic Signature of Registered Ag Trust Fund Contribution (). FORS: Delete R B AST PARKWAY, N.W. STE. 5	ent ADDITIONS/CHANG Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip:	Date GES TO OFFICERS AND DIRECTOR () Change () Addition () Change () Addition () Change () Addition	

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: PAMELA SILVAIN PRES 01/05/2004