

2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N19000000919

Entity Name: PSYCHOSOCIAL SERVICES CENTER INC.

Current Principal Place of Business:

3 NORTHEAST 12TH AVENUE
CHIEFLAND, FL 32626

Current Mailing Address:

3 NORTHEAST 12TH AVENUE
CHIEFLAND, FL 32626 US

FEI Number: 84-1838305

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

SANTIAGO, LEYDA M
3 NORTHEAST 12TH AVENUE
CHIEFLAND, FL 32626 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: _____

Electronic Signature of Registered Agent

_____ Date

Officer/Director Detail :

Title P
Name SANTIAGO, LEYDA M
Address 3 NORTHEAST 12TH AVENUE
City-State-Zip: CHIEFLAND FL 32626

Title VP
Name ACEVEDO MARTELL, ROBERTO
Address 111 SE 140TH AVE.
City-State-Zip: OLD TOWN FL 32680

Title TREA
Name ACEVEDO SANTIAGO, ROBERTO
Address 3 NORTHEAST 12TH AVENUE
City-State-Zip: CHIEFLAND FL 32626

I hereby 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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: LEYDA SANTIAGO

PRESIDENT

09/16/2020

Electronic Signature of Signing Officer/Director Detail

Date