

**2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P01000091282

**Entity Name:** CAROLYN COLE ARNOLD, PSY.D., P.A.

**Current Principal Place of Business:**

34 PEPPER CREEK  
PEPPER PIKE, OH 44124

**Current Mailing Address:**

34 PEPPER CREEK  
PEPPER PIKE, OH 44124 US

**FEI Number:** 65-0501755

**Certificate of Status Desired:** No

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

ARNOLD, CAROLYN CPSY.D.  
34 PEPPER CREEK  
PEPPER PIKE, FL 44124 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 ARNOLD, CAROLYN C  
Address 34 PEPPER CREEK  
City-State-Zip: PEPPER PIKE OH 44124

Title SEC  
Name ARNOLD, CHARLES  
Address 34 PEPPER CREEK  
City-State-Zip: PEPPER PIKE OH 44124

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

**SIGNATURE:** CAROLYN ARNOLD

**PRESIDENT**

**01/19/2017**

Electronic Signature of Signing Officer/Director Detail

Date