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.

PST

SIGNATURE: DOYLE PATTON

SUNRISE, FL 33351
Current Mailing Address:

Current Principal Place of Business:

DOCUMENT# P04000161039

8890 WEST OAKLAND PARK BLVD.

20331 NE 20TH PLACE MIAMI, FL 33179

FEI Number: 20-2000235

Name and Address of Current Registered Agent:

PATTON, DOYLE E 20331 NE 20TH PLACE MIAMI, FL 33179 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:

SUITE #103

Electronic Signature of Registered Agent

2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT

Entity Name: PATTON PSYCHOLOGY ASSOCIATES, INC.

Officer/Director Detail :

Title	PST	Title	V
Name	PATTON, DOYLE E	Name	LOPEZ, MARIA R
Address	20331 NE 20TH PLAVE	Address	20331 NE 20TH PLAVE
City-State-Zip:	MIAMI FL 33179	City-State-Zip:	MIAMI FL 33179

Electronic Signature of Signing Officer/Director Detail

Date

Certificate of Status Desired: No

02/26/2014 Date