

**2018 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P07000100903

**Entity Name:** PSYCHOTHERAPEUTIC RESOURCES, INC.

**Current Principal Place of Business:**

2631 NW 41ST STREET, SUITE E6  
GAINESVILLE, FL 32606

**Current Mailing Address:**

2631 NW 41ST STREET, SUITE E6  
GAINESVILLE, FL 32606 US

**FEI Number: 51-0647109**

**Certificate of Status Desired: No**

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

LAWRENCE, ALLISON D  
2631 NW 41ST STREET, SUITE E6  
GAINESVILLE, FL 32606 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:** ALLISON LAWRENCE

04/24/2018

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title VP, TREASURER  
Name LAWRENCE, ALVIN WJR  
Address 11822 NW 14TH RD  
City-State-Zip: GAINESVILLE FL 32606

Title PRESIDENT  
Name LAWRENCE, ALLISON D.C.  
Address 1203 NW 120TH WAY  
City-State-Zip: GAINESVILLE FL 32606

*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:** ALLISON D.C. LAWRENCE

PRESIDENT

04/24/2018

Electronic Signature of Signing Officer/Director Detail

Date