

2018 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000013312

Entity Name: COMPREHENSIVE MEDPSYCH SYSTEMS, INC.

Current Principal Place of Business:

1090 S. TAMIAMI TRAIL
SARASOTA, FL 34236

Current Mailing Address:

1090 S. TAMIAMI TRAIL
SARASOTA, FL 34236 US

FEI Number: 65-0812381

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

KANTER, GEOFFREY DR.
1090 S. TAMIAMI TRAIL
SARASOTA, FL 34236 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 DR.
Name KANTER, GEOFFREY DR.
Address 1090 S. TAMIAMI TRAIL
City-State-Zip: SARASOTA FL 34236

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: GEOFFREY KANTER

PRESIDENT

03/28/2018

Electronic Signature of Signing Officer/Director Detail

Date