2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 15, 2014
Secretary of State
CC6697872121

DOCUMENT# V05926

Entity Name: HIVEMIND NEUROPSYCHOLOGICAL SERVICES, P.A.

Current Principal Place of Business:

4823 MARSH HAMMOCK DR. E
JACKSONVILLE, FL 32224

Current Mailing Address:

4823 MARSH HAMMOCK DR. E
JACKSONVILLE, FL 32224

FEI Number: 59-3101007

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BEE, VAL J
4823 MARSH HAMMOCK DR. E
JACKSONVILLE, FL 32224 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	D
Name	BEE, VAL J
Address	4823 MARSH HAMMOCK DR E
City-State-Zip:	JACKSONVILLE FL 32224

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: VAL J. BEE PRESIDENT 04/15/2014

Electronic Signature of Signing Officer/Director Detail — Date