

1.) CORPORATION NAME:

**The Psychotherapy Center: Solutions For Living,Ltd.**

DUE DATE: **8/31/2012**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**R. BARROW BLACKWELL  
KAUFMAN & CANOLES PC  
ONE COMMERCIAL PLACE, SUITE 2000**

SCC ID NO: **03460987**

**NORFOLK, VA 23510-2103**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	5,000

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

**NORFOLK CITY**

4.) STATE OR COUNTRY OF INCORPORATION:

**VA**

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 327 W 21ST ST STE 205

CITY/ST/ZIP: NORFOLK, VA 23517

7.) DIRECTORS AND PRINCIPAL OFFICERS: All directors and principal officers must be listed. An individual may be designated as both a director and an officer.

NAME:	PHILIP G. DAVIDSON, IV LCSW	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	PRESIDENT		
ADDRESS:	327 W 21ST ST STE 205		
CITY/ST/ZIP/CO:	NORFOLK, VA 23517		
NAME:	MARC D. RABINOWITZ LCSW	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	327 W 21ST ST STE 205		
CITY/ST/ZIP/CO:	NORFOLK, VA 23517		
NAME:	SUSAN H STONES LCSW	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	SEC/TREAS		
ADDRESS:	327 W 21ST ST STE 205		
CITY/ST/ZIP/CO:	NORFOLK, VA 23517		
NAME:	LAURA GIAT FORMAN PSY D FAPA	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	ASST SECRETARY		
ADDRESS:	327 W 21ST ST STE 205		
CITY/ST/ZIP/CO:	NORFOLK, VA 23517		
NAME:	BONNIE GORDON-RABINOWITZ, LCSW	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	ASST SECRETARY		
ADDRESS:	327 W 21ST ST STE 205		
CITY/ST/ZIP/CO:	NORFOLK, VA 23517		

I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.

/s/ PHILIP G. DAVIDSON, IV LCSW	PHILIP G. DAVIDSON, IV LCSW, PRESIDENT	3/1/2013 DATE
SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	PRINTED NAME AND CORPORATE TITLE	
It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.		