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**Tennessee Limited Liability Company Annual Report Form**

AR Filing #: 04594524

File online at: <http://TNBear.TN.gov/AR>

FILED: Jan 5, 2015 12:07PM

Due on/Before: 04/01/2015

Reporting Year: 2014

Annual Report Filing Fee Due:

\$300 minimum plus \$50 for each member over 6 to a maximum of \$3000

\$20 additional if changes are made in block 3 to the registered agent/office

This Annual Report has been successfully paid for and filed. Please keep this report for your records.

CC Payment Ref #: 159950021**SOS Control Number:** 643324

Limited Liability Company - Domestic

Date Formed: 10/28/2010

Formation Locale: TENNESSEE

(1) Name and Mailing Address:Neuropsychology Consultants, PLLC
PO BOX 121073
NASHVILLE, TN 37212-1073**(2) Principal Office Address:**STE 306
4219 HILLSBORO PIKE
NASHVILLE, TN 37215-3332**(3) Registered Agent (RA) and Registered Office (RO) Address:**JAMES S. WALKER
812 LEALAND CT
NASHVILLE, TN 37204-4006Agent Changed: NoAgent County: DAVIDSON COUNTY(4) This LLC is (change if incorrect): Director Managed, Manager Managed, X Member Managed,
 Board Managed (appropriate if formed prior to 1/1/2006 only).

If board, director, or manager managed, provide the names and business addresses, including zip codes, of the governors, directors, or managers (or their equivalent). If governed by the pre-2006 LLC act and board managed, list board members and managers.

Name	Business Address	City, State, Zip
James S Walker	PO BOX 121073	NASHVILLE, TENNESSEE 37212

(5) Provide the names and business addresses, including zip codes, of any LLC Officers (if governed by the Revised LLC Act), or their equivalent.

Name	Business Address	City, State, Zip
James S Walker	812 Lealand Ct	Nashville, TN 37204

(6) Number of members on the date the annual report is executed: 1 This LLC is prohibited from doing business in Tennessee (check if applicable)

(7) Signature: Electronic

(8) Date: 01/05/2015

(9) Type/Print Name: James S Walker

(10) Title: Principal