

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000141028

FILED
Apr 02, 2009
Secretary of State

Entity Name: NORTH FLORIDA BEHAVIORAL HEALTH PARTNERS, INC.

Current Principal Place of Business:

8906 BRITTANY WAY
TAMPA, FL 33619

New Principal Place of Business:

Current Mailing Address:

8906 BRITTANY WAY
TAMPA, FL 33619

New Mailing Address:

FEI Number: 20-1847098 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DILLON, JOHN J
8906 BRITTANY WAY
TAMPA, FL 33619 US

Name and Address of New Registered Agent:

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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: QUIJANO, IVANA
Address: 8906 BRITTANY WAY
City-St-Zip: TAMPA, FL 33619

Title: P () Delete
Name: DILLON, JOHN
Address: 8906 BRITTANY WAY
City-St-Zip: TAMPA, FL 33619

Title: S () Delete
Name: LABARTA, MARGARITA
Address: 4800 SW 13TH ST.
City-St-Zip: GAINESVILLE, FL 32608

Title: VP () Delete
Name: MOORE, DAVID J
Address: 8906 BRITTANY WAY
City-St-Zip: TAMPA, FL 33619

Title: D () Delete
Name: LABARTA, MARGARITA
Address: 4800 SW 13TH ST
City-St-Zip: GAINESVILLE, FL 32608

Title: T () Delete
Name: CHERRY, JON
Address: 8706 BRITTANY WAY
City-St-Zip: TAMPA, FL 33619

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DIR (X) Change () Addition
Name: QUIJANO, IVAN A
Address: 8906 BRITTANY WAY
City-St-Zip: TAMPA, FL 33619

Title: VP (X) Change () Addition
Name: DILLON, JOHN D
Address: 8906 BRITTANY WAY
City-St-Zip: TAMPA, FL 33619

Title: DIR (X) Change () Addition
Name: LABARTA, MARGARITA
Address: 4800 SW 13TH ST.
City-St-Zip: GAINESVILLE, FL 32608

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: PRES (X) Change () Addition
Name: GLYNN, PATRICK
Address: 8906 BRITTANY WAY
City-St-Zip: TAMPA, FL 33619

Title: DIR (X) Change () Addition
Name: CHERRY, JON T
Address: 2020 TALLY ROAD
City-St-Zip: LEESBURG, FL 34748

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: JOHN J. DILLON

Electronic Signature of Signing Officer or Director

VP

04/02/2009

Date