2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000084511

FILED Mar 31, 2009 Secretary of State

Entity Name: BEHAVIORAL MEDICINE SERVICES OF SOUTH FLORIDA, P.A.

Current Principal Place of Business: New Principal Place of Business:

3200 SW 60TH COURT SUITE 302 MIAMI, FL 33155

Current Mailing Address: New Mailing Address:

3200 SW 60TH COURT SUITE 302 MIAMI, FL 33155

FEI Number: 65-0786109 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

FIELDSTONE, RONALD R ESQ
200 S BISCAYNE BLVD SUITE 2100
MIAMI, FL 33131 US
RESNICK, TREVOR J
3200 SW 60 CT
#302
MIAMI, FL 33155 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: TREVOR J. RESNICK 03/31/2009

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D () Delete Title: () Change () Addition

 Name:
 RESNICK, TREVOR
 Name:

 Address:
 3200 SW 60TH COURT SUITE 302
 Address:

 City-St-Zip:
 MIAMI, FL 33155
 City-St-Zip:

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: TREVOR J. RESNICK D 03/31/2009

Electronic Signature of Signing Officer or Director

Date