

2023 FLORIDA NOT FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# 744144

Entity Name: MERIDIAN BEHAVIORAL HEALTHCARE, INC.

Current Principal Place of Business:

4300 SW 13TH STREET
GAINESVILLE, FL 32608-4006

Current Mailing Address:

PO BOX 141750
ATTN: FISCAL SPECIALIST
GAINESVILLE, FL 32614 US

FEI Number: 59-1906214

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

SAVOIE, DONALD CEO
4300 SW 13TH ST.
GAINESVILLE, FL 32608 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: DONALD SAVOIE

10/13/2023

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title DIRECTOR
Name PHILLIPS-MAXWELL, IRMA
Address 4300 SW 13TH STREET
City-State-Zip: GAINESVILLE FL 32608-4006

Title DIRECTOR
Name KNIGHT, PATRICIA
Address 4300 SW 13TH STREET
City-State-Zip: GAINESVILLE FL 32608-4006

Title CEO
Name SAVOIE, DONALD
Address 4300 SW 13TH STREET
City-State-Zip: GAINESVILLE FL 32608-4006

Title DIRECTOR
Name SHARPE, BECKY
Address 4300 SW 13TH STREET
City-State-Zip: GAINESVILLE FL 32608-4006

Title DIRECTOR
Name METTS, PAUL
Address 4300 SW 13TH STREET
City-State-Zip: GAINESVILLE FL 32608-4006

Title VC
Name FELLER, JEFF
Address 4300 SW 13TH STREET
City-State-Zip: GAINESVILLE FL 32608-4006

Title SECRETARY
Name MCCLENDON, STEPHANIE
Address 4300 SW 13TH STREET
City-State-Zip: GAINESVILLE FL 32608-4006

Title CHAIRMAN
Name SEIFERT, CHRISTINA NIETO
Address 4300 SW 13TH STREET
City-State-Zip: GAINESVILLE FL 32608-4006

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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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: DONALD SAVOIE

CEO

10/13/2023

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name MILNER, BOB
Address 4300 SW 13TH STREET
City-State-Zip: GAINESVILLE FL 32608-4006

Title DIRECTOR
Name CASON, JASON
Address 4300 SW 13TH STREET
City-State-Zip: GAINESVILLE FL 32608-4006

Title DIRECTOR
Name MANSKE, AMANDA
Address 4300 SW 13TH STREET
City-State-Zip: GAINESVILLE FL 32608-4006

Title DIRECTOR
Name CRUMMEY, KINDALL
Address 4300 SW 13TH STREET
City-State-Zip: GAINESVILLE FL 32608-4006

Title DIRECTOR
Name BENNETT, DENISE
Address 4300 SW 13TH STREET
City-State-Zip: GAINESVILLE FL 32608-4006

Title DIRECTOR
Name WEGENER, STUART
Address 4300 SW 13TH STREET
City-State-Zip: GAINESVILLE FL 32608-4006