### 2014 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

**DOCUMENT# 762852** 

Entity Name: DAVID LAWRENCE MENTAL HEALTH CENTER, INC.

## **Current Principal Place of Business:**

6075 BATHEY LANE NAPLES. FL 34116

# **Current Mailing Address:**

6075 BATHEY LANE NAPLES, FL 34116 US

# FEI Number: 59-2206025

## Name and Address of Current Registered Agent:

BURGESS, SCOTT 6075 BATHEY LANE NAPLES, FL 34116 US Certificate of Status Desired: Yes

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	SCOTT BURGESS			03/25/2014		
	Electronic Signature of Registered Agent			Date		
Officer/Director Detail :						
Title	PRESIDENT	Title	VP			
Name	VEINTIMILLA, PABLO	Name	JOHNSON, DOUGLAS			
Address	6075 BATHEY LANE	Address	6075 BATHEY LANE			
City-State-Zip:	NAPLES FL 34116	City-State-Zip:	NAPLES FL 34116			
Title	TREASURER	Title	SECRETARY			
Name	MCAVOY, BRIAN	Name	MORANTZ, ROBERT DR.			
Address	6075 BATHEY LANE	Address	6075 BATHEY LANE			
City-State-Zip:	NAPLES FL 34116	City-State-Zip:	NAPLES FL 34116			
Title	DIRECTOR	Title	DIRECTOR			
Name	FAY, CATHERINE	Name	FRANCIOSI, L. PATT PHD			
Address	6075 BATHEY LANE	Address	6075 BATHEY LANE			
City-State-Zip:	NAPLES FL 34116	City-State-Zip:	NAPLES FL 34116			
Title	DIRECTOR	Title	DIRECTOR			
Name	HACKER-BUECHEL, CARYN	Name	WELCH, GEORGE			
Address	6075 BATHEY LANE	Address	6075 BATHEY LANE			
City-State-Zip:	NAPLES FL 34116	City-State-Zip:	NAPLES FL 34116			

### Continues on page 2

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	: SCOTT BURGESS	CEO	03/25/2014
	Electronic Signature of Signing Officer/Director Detail		Date

Electronic Signature of Signing Officer/Director Detail

FILED Mar 25, 2014 Secretary of State CC4456897428

### **Officer/Director Detail Continued :**

Title	DIRECTOR	Title	DIRECTOR
Name	FINGERSH, JACK ESQ.	Name	WARNKEN, JAMES
Address	6075 BATHEY LANE	Address	6075 BATHEY LANE
City-State-Zip:	NAPLES FL 34116	City-State-Zip:	NAPLES FL 34116
Title	DIRECTOR	Title	DIRECTOR
Name	BASCUAS, JOSEPH PHD	Name	CHERRY, ARTHUR
Address	6075 BATHEY LANE	Address	6075 BATHEY LANE
City-State-Zip:	NAPLES FL 34116	City-State-Zip:	NAPLES FL 34116
Title	DIRECTOR	Title	DIRECTOR
Name	MENDOZA, DANIEL	Name	O'NEILL, WILLIAM
Address	6075 BATHEY LANE	Address	6075 BATHEY LANE
City-State-Zip:	NAPLES FL 34116	City-State-Zip:	NAPLES FL 34116
Title	CEO		
Name	BURGESS, SCOTT		

6075 BATHEY LANE Address City-State-Zip: NAPLES FL 34116