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: No

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			02/06/2014			
	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				
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## 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
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CEO

02/06/2014

Electronic Signature of Signing Officer/Director Detail

# FILED Feb 06, 2014 Secretary of State CC7257867247

#### **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