

2024 FOREIGN NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F23000003929

Entity Name: NATIONAL COUNCIL FOR BEHAVIORAL HEALTH INC.

FILED
Apr 15, 2024
Secretary of State
8878769096CC

Current Principal Place of Business:

1400 K STREET NW
SUITE 400
WASHINGTON, DC 20005

Current Mailing Address:

1400 K STREET NW
SUITE 400
WASHINGTON, DC 20005 US

FEI Number: 23-7092671

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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:

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT/CEO
Name INGOGLIA, CHARLES
Address 1400 K STREET NW
 SUITE 400
City-State-Zip: WASHINGTON DC 20005

Title VP
Name VENKATESH, MOHINI
Address 1400 K STREET NW
 SUITE 400
City-State-Zip: WASHINGTON DC 20005

Title VC
Name EISEN, VITKA
Address 1400 K STREET NW
 SUITE 400
City-State-Zip: WASHINGTON DC 20005

Title DIRECTOR
Name PELLEU, BRUCE
Address 1400 K STREET NW
 SUITE 400
City-State-Zip: WASHINGTON DC 20005

Title CHAIRMAN OF THE BOARD
Name WOODS, ED
Address 1400 K STREET NW
 SUITE 400
City-State-Zip: WASHINGTON DC 20005

Title FINANCE AVP
Name GUILLOTTE, JOHN
Address 1400 K STREET NW
 SUITE 400
City-State-Zip: WASHINGTON DC 20005

Title CFO
Name PELLEU, BRUCE
Address 1400 K STREET NW
 SUITE 400
City-State-Zip: WASHINGTON DC 20005

Title DIRECTOR
Name INGOGLIA, CHARLES
Address 1400 K STREET NW
 SUITE 400
City-State-Zip: WASHINGTON DC 20005

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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: CHARLES INGOGLIA

PRESIDENT/CEO

04/15/2024

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name VENKATESH, MOHINI
Address 1400 K STREET NW
 SUITE 400
City-State-Zip: WASHINGTON DC 20005