

2013 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F94000006079

Entity Name: COMPREHENSIVE BEHAVIORAL CARE, INC.

**FILED
Apr 27, 2013
Secretary of State
CC7139348177**

Current Principal Place of Business:

3405 W. DR. M. L. KING, JR., STE. 101
SUITE 101
TAMPA, FL 33607

Current Mailing Address:

3405 W. DR. M. L. KING, JR., STE. 101
SUITE 101
TAMPA, FL 33607 US

FEI Number: 59-3149475

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301 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 DCEO
Name MARCUS, CLARK
Address 3405 W. DR. M. L. KING, JR., STE. 101
City-State-Zip: TAMPA FL 33607

Title CFO
Name LANDIS, ROBERT
Address 3405 W. DR. M. L. KING, JR., STE. 101
City-State-Zip: TAMPA FL 33607

Title S
Name MANDEL, SHARON
Address 3405 W. DR. M. L. KING, JR., STE. 101
City-State-Zip: TAMPA FL 33607

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

SIGNATURE: ROBERT LANDIS

CFO

04/27/2013

Electronic Signature of Signing Officer/Director Detail

Date