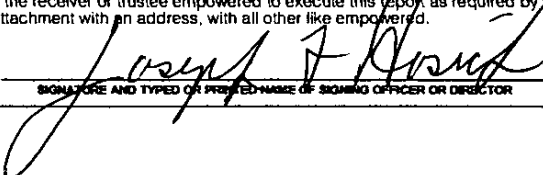


2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 13, 2006 8:00 am
Secretary of State

02-13-2006 90037 001 ****61.25

DOCUMENT # 730286 1. Entity Name HENDRY-GLADES MENTAL HEALTH CLINIC, INC.					
Principal Place of Business 80 EUCLID PL LABELLE, FL 33935 US			Mailing Address PO BOX 87 LABELLE, FL 33935 US		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number 59-1558636	
5. Certificate of Status Desired ☐				Applied For ☐ Not Applicable	
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent	
HOSICK, JOSEPH 601 WEST ALVERDEZ CLEWISTON, FL 33440				Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reappointing)					
Filing Fee is \$61.25 Due by May 1, 2006		9. Election Campaign Financing Trust Fund Contribution. ☐		\$5.00 May Be Added to Fees	
Make check payable to Florida Department of State					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE	D	☐ Delete	TITLE	☐ Change ☐ Addition	
NAME	GRANT, WARREN L		NAME		
STREET ADDRESS	4020 RAINBOW CIRCLE		STREET ADDRESS		
CITY-ST-ZIP	LABELLE, FL 33935		CITY-ST-ZIP		
TITLE	P	☐ Delete	TITLE	☒ Change ☐ Addition	
NAME	VALIANT, MARTHA		NAME		
STREET ADDRESS	570 CAPTAIN HENDRY DRIVE		STREET ADDRESS		
CITY-ST-ZIP	LABELLE, FL 33935		CITY-ST-ZIP		
TITLE	D	☐ Delete	TITLE	☒ Change ☐ Addition	
NAME	LEE, RONNIE		NAME	SECRETARY	
STREET ADDRESS	248 CALOOSA ESTATES		STREET ADDRESS		
CITY-ST-ZIP	LABELLE, FL 33935		CITY-ST-ZIP		
TITLE	T	☐ Delete	TITLE	☐ Change ☐ Addition	
NAME	SHUPE, CHRIS		NAME		
STREET ADDRESS	205 SO W.C. OWEN AVE.		STREET ADDRESS		
CITY-ST-ZIP	CLEWISTON, FL 33440		CITY-ST-ZIP		
TITLE	S	☒ Delete	TITLE	☐ Change ☐ Addition	
NAME	HAMPTON, PEGGY		NAME		
STREET ADDRESS	PO BOX 1019		STREET ADDRESS		
CITY-ST-ZIP	LABELLE, FL 33975		CITY-ST-ZIP		
TITLE	V	☐ Delete	TITLE	☒ Change ☐ Addition	
NAME	HOLLEY, KENNETH C		NAME	president	
STREET ADDRESS	P.O. BOX 550		STREET ADDRESS		
CITY-ST-ZIP	MOORE HAVEN, FL 33471		CITY-ST-ZIP		
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: 			Date: 2/7/06		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			Daytime Phone #: 863-983-1423		

Hendry-Glades Behavioral Health Center

ATTACHMENT

Joseph Hosick, MPA/CBHE, CEO/CFO
601 W. Alverdez Avenue, Clewiston, FL 33440
363 983-1423 - hgmhc@earthlink.net

40013550

#730286

BOARD OF DIRECTORS, FY 05-06

Kenneth C. Holley, President
P. O. Box 550
Moore Haven, FL 33471-0844

(863) 946-3937 (home) (minister)
(863) 227-0101 (cell) (863) 946-3016 (Fax)
(561) 261-0806 (cell)
E-mail: kenneth_holley@yahoo.com

Wayne Aldrich, Vice-President (1/05)
POB 459
Moore Haven, FL 33471

(863) 675-4867 (home) (863) 946-2709 (fax)
(863) 946-2083 (ofc) Superintendent of
Glades Co Schools

-Sheriff Ronnie Lee, Secretary - -
POB 579
LaBelle, FL 33975

(863) 674-4060 (work) (863) 674-4624 (FAX)
E-mail: (Sheriff, Hendry Co)

Chris Shupe, Treasurer (7/99)
205 So W. C. Owens Ave
Clewiston, FL 33440

(863) 675-6692 (home) (863) 983-5860 (Fax)
(863) 983-6181 (work) (bank president)
E-mail: cshupe@1stglades.com

Ramesh Devanesan, MD
500 West Sagamore Ave
Clewiston, FL 33440

(561) 758-7381 (cell) (863) 983-6655 (Fax)
(863) 983-3434 (work)
E-mail: Lchiarelli@hendryregional.org

Warren L. Grant (11/89)
4020 Rainbow Circle
LaBelle, FL 33935

(863) 675-2122 (home) (863) 517-1667 (cell)
(863) 674-4112 (work) (minister)
E-mail: kt4ga@hotmail.com

Dr. Paul Hofacker (12/05)
475 E Osceola Ave
Clewiston, FL 33440

(863) 983-1507 (work) (863) 983-1514 (fax)
(cell)
E-mail: hofackerp@hendry.k12.fl.us

Dr. Geraldine Nobles (7/05) - - - - -
P. O. Box 1900
LaBelle, FL 33975

(863) 675-0595 (home) - - - - -
(863) 675-6504 (Fax)
E-mail: g.nobles@worldnet.GH.net

Paul K. Puletti (1/02)
110 Hardee St
LaBelle, FL 33935

(863) 674-4120 (work) (863) 674-4571 (Fax)
(863) 675-5921 (home) (HS principal)
E-mail: PaulPuletti@hotmail.com

Martha Valiant, MD (1998) (dr)
570 Captain Hendry Drive
LaBelle, FL 33935

(863) 675-2506 (home) (863) 517-1471 (cell)
(863) 674-4076 (FAX-Sharon)
E-mail: MVbabydoc@earthlink.net

Sheriff Stuart Whiddon, Glades Co, Ex-officio Member
POB 39
Moore Haven, FL 33471

(863) 946-1366 (home)
(863) 946-0100 (work) (863) 946-0845 (FAX)
E-Mail: whiddons@flcjn.net (Sheriff, Glades Co)