

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F06000005830

FILED
Jan 03, 2012
Secretary of State

Entity Name: INNOVATIVE BEHAVIORAL SERVICES, INC.

Current Principal Place of Business:

357 TOWNE CENTER BLVD.
#100
RIDGELAND, MS 39157

New Principal Place of Business:

Current Mailing Address:

357 TOWNE CENTER BLVD.
#100
RIDGELAND, MS 39157

New Mailing Address:

FEI Number: 20-3762866

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PAIGE, TQINATA D
458 LAKE BRIDGE LANE
#718
APOPKA, FL 32703 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: COO
Name: MCGILL, DOROTHY J
Address: 4542 VILLAGE DRIVE
City-St-Zip: JACKSON, MS 39206

Title: D
Name: JAMES, LAVERNA MS
Address: 1214 FERNCREST DRIVE
City-St-Zip: JACKSON, MS 39211

Title: P
Name: WARD, PAMELA
Address: 6227 MOSSLINE
City-St-Zip: JACKSON, MS 39211

Title: T
Name: WARD, DEWAYNE
Address: 6227 MOSSLINE
City-St-Zip: JACKSON, MS 39211

Title: V
Name: WOODBERRY, DEXTER
Address: P. O. BOX 684
City-St-Zip: HAZLEHURST, MS 39083

Title: S
Name: ASHFORD, CLAY
Address: 7457 COUNTY ROAD 436
City-St-Zip: WATER VALLEY, MS 38965

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: DOROTHY J MCGILL

COO

01/03/2012

Electronic Signature of Signing Officer or Director

Date