

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000051894

FILED
Apr 26, 2006
Secretary of State

Entity Name: BEHAVIORAL AND COUNSELING CENTERS, LLC

Current Principal Place of Business:

15095 63RD PLACE NORTH
LOXAHATCHEE, FL 33470

New Principal Place of Business:

4849 LAKE WORTH ROAD
GREENACRES, FL 33463

Current Mailing Address:

15095 63RD PLACE NORTH
LOXAHATCHEE, FL 33470

New Mailing Address:

4849 LAKE WORTH ROAD
GREENACRES, FL 33463

FEI Number:

FEI Number Applied For (X)

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BOURSIQUOT, PATRICK
15095 63RD PLACE NORTH
LOXAHATCHEE, FL 33470 US

Name and Address of New Registered Agent:

BOURSIQUOT, PATRICK
4849 LAKE WORTH ROAD
GREENACRES, FL 33463 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: PATRICK BOURSIQUOT

04/26/2006

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: P () Change (X) Addition
Name: PATRICK, BOURSIQUOT
Address: 4849 LAKE WORTH ROAD
City-St-Zip: GREENACRES, FL 33470

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: PATRICK BOURSIQUOT

P

04/26/2006

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date