

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000022155

FILED
Apr 20, 2007
Secretary of State

Entity Name: THE BEHAVIORAL ARTS & RESEARCH CLINIC, LLC

Current Principal Place of Business:

11798 SAN JOSE BLVD., SUITE 2
JACKSONVILLE, FL 32223

New Principal Place of Business:

Current Mailing Address:

11798 SAN JOSE BLVD., SUITE 2
JACKSONVILLE, FL 32223

New Mailing Address:

FEI Number: 16-1751359

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

BROWN, KIMBERLY
4439 SEABREEZE DRIVE
JACKSONVILLE, FL 32250 US

Name and Address of New Registered Agent:

BROWN, KIMBERLY
608 ACORN COURT
JACKSONVILLE, FL 32259 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: KIMBERLY BROWN

04/20/2007

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: BROWN, KIMBERLY
Address: 4439 SEABREEZE DRIVE
City-St-Zip: JACKSONVILLE, FL 32250

Title: MGR (X) Delete
Name: MAJOR, SAUDIA
Address: 32 COMARES AVENUE
City-St-Zip: ST. AUGUSTINE, FL 32080

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: BROWN, KIMBERLY
Address: 608 ACORN COURT
City-St-Zip: JACKSONVILLE, FL 32259

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: KIMBERLY BROWN

MGR

04/20/2007

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