

2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000083547

FILED
Jan 14, 2010
Secretary of State

Entity Name: BEHAVIORAL HEALTH SOLUTIONS, LLC

Current Principal Place of Business:

1221 W. LAKEVIEW AVENUE
C/O EXECUTIVE OFFICE
PENSACOLA, FL 32501

New Principal Place of Business:

Current Mailing Address:

1221 W. LAKEVIEW AVENUE
C/O EXECUTIVE OFFICE
PENSACOLA, FL 32501

New Mailing Address:

FEI Number: 20-5421098

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BEMBRY, GARY L
1221 W. LAKEVIEW AVE.
PENSACOLA, FL 32501 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

MANAGING MEMBERS/MANAGERS:

Title: CD
Name: LANDRUM, BRITT JR
Address: 4050 BEVEDERE DRIVE
City-St-Zip: PENSACOLA, FL 32514

Title: VCD
Name: JORDAN, DALE
Address: 825 BAYSHORE DRIVE, #305
City-St-Zip: PENSACOLA, FL 32507

Title: P
Name: BEMBRY, GARY
Address: 2543 ANGEL COURT
City-St-Zip: GULF BREEZE, FL 32563

Title: CFO
Name: HILL, ALLISON
Address: 6618 ALLISON WAY
City-St-Zip: PACE, FL 32571

Title: S
Name: KIRTON, NANCY
Address: 6051 LARAMIE WAY
City-St-Zip: MILTON, FL 32570

I hereby 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: NANCY KIRTON

S

01/14/2010

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