2008 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

FILED
Nov 07, 2008
Secretary of State

DOCUMENT# L07000107517

Entity Name: BEHAVIORAL HEALTH PROFESSIONALS, LLC

Current Principal Place of Business:

4951 SOUTHFORK DRIVE
LAKELAND, FL 33813

New Principal Place of Business:

1239 E. MAIN STREET
BARTOW, FL 33830

Current Mailing Address:

P.O. BOX 1559
BARTOW, FL 338311559

New Mailing Address:

FEI Number: **FEI Number Applied For (X)** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

KILEY, MARY LU PRES.
829 WOODWARD STREET
LAKELAND, FL 33803 US

Name and Address of New Registered Agent:

SIERRA, J G PRES.
4187 AUDUBON OAKS CIRCLE
APT 11-204
LAKELAND, FL 33809 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: J. GILBERT SIERRA 11/07/2008
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: PRES ( ) Delete
Name: KILEY, MARY LU
Address: 829 WOODWARD STREET
City-St-Zip: LAKELAND, FL 33803

ADDITIONS/CHANGES:

Title: PRES (X) Change ( ) Addition
Name: SIERRA, J G
Address: 4187 AUDUBON OAKS CIRCLE APT 11-204
City-St-Zip: LAKELAND, FL 33809

I hereby certify that the information supplied with this filing does not qualify 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: J. GILBERT SIERRA PRES 11/07/2008
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date