

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L07000113694

**FILED**  
**Mar 30, 2011**  
**Secretary of State**

**Entity Name:** STAATS BEHAVIORAL HEALTH CONSULTING, LLC

**Current Principal Place of Business:**

1170 GULF BLVD. #1601  
CLEARWATER, FL 33767 US

**New Principal Place of Business:**

**Current Mailing Address:**

1170 GULF BLVD. #1601  
CLEARWATER, FL 33767 US

**New Mailing Address:**

**FEI Number:** 26-1388456

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

WERTS, EIRENE  
110 DELAWARE BLVD  
6C  
JUPITER, FL 33458 US

**Name and Address of New Registered Agent:**

WERTS, EIRENE  
110 N DELAWARE BLVD  
6C  
JUPITER, FL 33458 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:

03/30/2011

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR  
Name: STAATS, CARLA B  
Address: 1170 GULF BLVD. #1601  
City-St-Zip: CLEARWATER, FL 33767 US

Title: VP  
Name: STAATS, DEWAYNE  
Address: 1170 GULF BLVD #1601  
City-St-Zip: CLEARWATER, FL 33767

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: DEWAYNE STAATS

VP

03/30/2011

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