

2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L09000075076

FILED
Jan 05, 2011
Secretary of State

Entity Name: RESILIENCY BEHAVIORAL HEALTH SERVICES, LLC

Current Principal Place of Business:

1634 MAJESTIC VIEW LANE
FLEMING ISLAND, FL 32003

New Principal Place of Business:

1618 MAJESTIC VIEW LANE
FLEMING ISLAND, FL 32003

Current Mailing Address:

1634 MAJESTIC VIEW LANE
FLEMING ISLAND, FL 32003

New Mailing Address:

1618 MAJESTIC VIEW LANE
FLEMING ISLAND, FL 32003

FEI Number: 20-8986583

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SECHRIST, STACY D
1634 MAJESTIC VIEW LANE
FLEMING ISLAND, FL 32003 US

Name and Address of New Registered Agent:

SECHRIST, STACY D
1618 MAJESTIC VIEW LANE
FLEMING ISLAND, FL 32003 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:

01/05/2011

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR
Name: SECHRIST, STACY D
Address: 1618 MAJESTIC VIEW LANE
City-St-Zip: FLEMING ISLAND, FL 32003

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: STACY D. SECHRIST

MGR

01/05/2011

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