2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Feb 19, 2012
Secretary of State

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Entity Name: 2ND CHANCE MENTAL HEALTH CENTER, LLC

Current Principal Place of Business:

1541 S.E. PORT SAINT LUCIE BLVD.
SUITE F
PORT SAINT LUCIE, FL 34952

New Principal Place of Business:

Current Mailing Address:

7204 ASHFORD LANE
BOYNTON BEACH, FL 33472

New Mailing Address:

FEI Number: 27-3374222 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

KAPLAN, ARLENE F PH.D.
7204 ASHFORD LANE
BOYNTON BEACH, FL 33472 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: MGRM
Name: KAPLAN, ARLENE F PH.D.
Address: 7204 ASHFORD LANE
City-St-Zip: BOYNTON BEACH, FL 33472

Title: MGRM
Name: BROWN, JOHNNY L
Address: 1220 S.W. 85TH TERRACE
City-St-Zip: PEMBROKE PINES, FL 33025

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 Statues.

SIGNATURE: DR. ARLENE F. KAPLAN VP 02/19/2012

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