2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M03000004308

Entity Name: CENPATICO BEHAVIORAL HEALTH, LLC

FILED Jan 16, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 823 CONGRESS AVE. SUITE 600 AUSTIN, TX 78701 **Current Mailing Address: New Mailing Address:** 7711 CARONDELET, SUITE 800 ST. LOUIS, MO 63105 FEI Number: 68-0461584 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 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: ADDITIONS/CHANGES: Title: () Change () Addition () Delete NEIDORFF, MICHAEL F Name: Name: 7711 CARONDELET AVE. SUITE 800 Address: Address: ST. LOUIS, MO 63105 City-St-Zip: City-St-Zip: Title: MGR () Delete Title: () Change () Addition DONALDSON, SAMUEL Name: Name: Address: 7711 CARONDELET AVE. SUITE 800 Address: City-St-Zip: ST. LOUIS, MO 63105 City-St-Zip: Title: MGR () Delete Title: MGR (X) Change () Addition WITTY, KAREY WILLIAMSON, KEITH Name: Name: 7711 CARONDELET AVE. SUITE 800 7711 CARONDELET AVE. SUITE 800 Address: Address: City-St-Zip: ST. LOUIS, MO 63105 City-St-Zip: ST. LOUIS, MO 63105 Title: MGR () Delete Title: () Change () Addition Name: BUTTS, BRIAN Name: 7711 CARONDELET AVE Address: Address: City-St-Zip: ST LOUIS, MO 63105 City-St-Zip: Title: () Delete Title: () Change () Addition SCHEFFEL, WILLIAM Name: Name: 7711 CARONDELET AVE Address: Address: City-St-Zip: SAINT LOUIS, MO 63105 City-St-Zip: Title: () Delete Title: (X) Change () Addition BRODIN, PER BRODIN PER Name: Name: Address: 7711 CARONDELET AVE Address: 7711 CARONDELET AVE SAINT LOUIS, MO 63105 SAINT LOUIS, MO 63105 City-St-Zip: City-St-Zip:

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: KEITH WILLIAMSON MGR 01/16/2008