2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000006373

Entity Name: COMPREHENSIVE CARE SERVICES, INCORPORATED

FILED Feb 10, 2004 Secretary of State

1516 EAST COLONIAL DRIVE, SUITE 302 7319 BRIARLYN COURT ORLANDO, FL 32803 ORLANDO, FL 328185781

Current Mailing Address: New Mailing Address:

1516 EAST COLONIAL DRIVE, SUITE 302 7319 BRIARLYN COURT ORLANDO, FL 32803 ORLANDO, FL 328185781

FEI Number: 59-3672802 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:

BUCKNER, KEITH A BUCKNER, KEITH A 6339 PREÁKNESS DRIVE 7319 BRIARLYN COURT ORLANDO, FL 32818 ORLANDO, FL 32818

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: 02/10/2004

> Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change () Addition () Delete

BUCKNER, KEITH A BUCKNER, KEITH A Name: Name: 6339 PREAKNESS DRIVE Address: 7319 BRIARLYN COURT Address: City-St-Zip: ORLANDO, FL 328181742 City-St-Zip: ORLANDO, FL 328185781

Title: VD () Delete Title: (X) Change () Addition

Name: ROGERS, MELVIN Name: ROGERS, MELVIN

Address: 3225 ARDEN VILLAS BLVD #18 Address: 3225 ARDEN VILLAS BLVD #18 City-St-Zip: ORLANDO, FL 32808 City-St-Zip: ORLANDO, FL 32808

Title: () Delete Title: () Change () Addition LEWIS, ELLA Name: Name:

4826 INDIATLANTIC DRIVE Address: Address: City-St-Zip: ORLANDO, FL 32808 City-St-Zip:

(X) Change () Addition Title: TD () Delete Title: TD WALTON, AILEEN Name: WALTON, AILEEN Name:

530 WYNBROOKE PARKWAY 1675 NISKEY LAKE ROAD, SW Address: Address:

City-St-Zip: ATLANTA, GA 30087 City-St-Zip: ATLANTA, GA 30331

Title: () Delete Title: (X) Change () Addition DAVIS, DONOVAN DAVIS, DONOVAN Name: Name:

1272 FALCONCREST BLVD 3817 WHITE HERON DRIVE Address: Address:

City-St-Zip: APOPKA, FL 32710 City-St-Zip: ORLANDO, FL 32808

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: KEITH A. BUCKNER Ρ 02/10/2004