2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000005239

Entity Name: BOLEY PROPERTIES, INC.

FILED Jan 19, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

445 31ST STREET N. 445 31ST STREET NORTH

SAINT PETERSBURG, FL 33713 US ST. PETERSBURG, FL 33713

Current Mailing Address: New Mailing Address:

445 31ST STREET N. 445 31ST STREET NORTH

ST. PETERSBURG, FL 33713 SAINT PETERSBURG, FL 33713 US

FEI Number: 59-3731437 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

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

MACMATH, GARY BOLEY CENTERS FOR BEHAVIORAL HEALTH CARE

445 31ST. STREET N. 445 31ST STREET NORTH ST. PETERSBURG, FL 33713 US

SAINT PETERSBURG, FL 33713 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.

MACMATH, GARY

BOLEY CENTERS, INC

SIGNATURE: GARY MACMATH 01/19/2009

> Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

۷P () Delete (X) Change () Addition

HALL, CELIA HALL, CELIA Name: Name: 150-2ND AVE. N., #720 445 31ST STREET NORTH Address: Address: City-St-Zip: ST. PETERSBURG, FL 33701 City-St-Zip: SAINT PETERSBURG, FL 33713 US

Title: Title: (X) Change () Addition () Delete MITTERMAYR, MARKUS Name: MITTERMAYR, MARKUS Name:

Address: 4400 CENTRAL AVE. Address: 445 31ST STREET NORTH City-St-Zip: ST. PETERSBURG, FL 33711 City-St-Zip: SAINT PETERSBURG, FL 33713 US

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

BOWMAN, WARREN BOWMAN, WARREN Name: Name: Address: 5855 CENTRAL AVE. Address: 445 31ST STREET NORTH City-St-Zip: ST. PETERSBURG, FL 33707 City-St-Zip: SAINT PETERSBURG, FL 33713 US

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

Name: RODRIGUEZ, ANTHONY Name: Address: 4037-76TH AVE. N. Address: City-St-Zip: PINELLAS PARK, FL 33781 City-St-Zip:

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

RILEY, SHANNON Name: Name: 7101-53RD ST. N. Address: Address: City-St-Zip: PINELLAS PARK, FL 33781 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 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: MARKUS MITTERMAYR D 01/19/2009