

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

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FILED
Apr 26, 2012
Secretary of State

Entity Name: BROWARD BEHAVIORAL HEALTH COALITION, INC.

Current Principal Place of Business:

1946 HARRISON STREET
HOLLYWOOD, FL 33020

New Principal Place of Business:

1926 HARRISON STREET
HOLLYWOOD, FL 33020

Current Mailing Address:

1946 HARRISON STREET
HOLLYWOOD, FL 33020

New Mailing Address:

1926 HARRISON STREET
HOLLYWOOD, FL 33020

FEI Number: 45-3675836

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

ATKINSON, WILSON C ESQ
ATKINSON DINER STONE MANKUTA & PLOUCHA,P.A
100 SE THRID AVE STE 1400
FORT LAUDERDALE, FL 33394 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

OFFICERS AND DIRECTORS:

Title: C
Name: BUTTERWORTH, ROBERT A
Address: C/O ATKINSON 100 SE 3RD AVE SUITE 1400
City-St-Zip: FORT LAUDERDALE, FL 33394

Title: VP
Name: DAVIS, LARRY S
Address: 1926 HARRISON STREET
City-St-Zip: HOLLYWOOD, FL 33020

Title: S
Name: RODRIQUEZ, ROCKY
Address: C/O BETTER HOMES 777 S. FEDERAL HWY
City-St-Zip: FORT LAUDERDALE, FL 33316

Title: T
Name: BRUNSON, ANTHONY
Address: C/O SHARPTON 110 E. BROWARD BLVD.
City-St-Zip: FORT LAUDERDALE, FL 33301

I hereby 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 all other like empowered.

SIGNATURE: ROBERT A. BUTTERWORTH

C

04/26/2012

Electronic Signature of Signing Officer or Director

Date