

2007 CORPORATION ANNUAL REPORT

DOCUMENT# N12000000835

FILED
May 08, 2007
Secretary of State**Entity Name:** BOARD OF BEHAVIOR ANALYSTS, INC.**Current Principal Place of Business:**1852 N PINELLAS AVE
TARPON SPRINGS, FL 34689**New Principal Place of Business:****Current Mailing Address:**1848 N PINELLAS AVE
TARPON SPRINGS, FL 34689**New Mailing Address:****FEI Number:** 20-3395232**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**ROSS, JOHN J
1848 N PINELLAS AVE
TARPON SPRINGS, FL 34689 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**In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.****Election Campaign Financing Trust Fund Contribution ().****OFFICERS AND DIRECTORS:****Title:** PTD () Delete
Name: ROSS, JOHN J
Address: 6104 POLK STREET
City-St-Zip: NEW PORT RICHEY, FL 34653**Title:** SD () Delete
Name: COWLES, AMELIA
Address: 475 MAPLEWAY
City-St-Zip: SAFETY HARBOR, FL 34695**Title:** VPD () Delete
Name: COWLES, GENE
Address: 475 MAPLEWAY
City-St-Zip: SAFETY HARBOR, FL 34695**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** PTD (X) Change () Addition
Name: ROSS, JOHN J
Address: 1848 N PINELLAS AVE
City-St-Zip: TARPON SPRINGS, FL 34689**Title:** () Change () Addition
Name:
Address:
City-St-Zip:**Title:** () Change () Addition
Name:
Address:
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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JOHN ROSS_____
Electronic Signature of Signing Officer or Director

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05/08/2007

Date