2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 21, 2011
Secretary of State

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Entity Name: BEHAVIORAL HEALTH MANAGEMENT SERVICES, INC.

Current Principal Place of Business:

300 PINELLAS STREET
ADLER 5
CLEARWATER, FL 33756

New Principal Place of Business:

900 CARILLON PARKWAY
MAILBOX 17, SUITE 406
CLEARWATER, FL 33716 US

Current Mailing Address:

16225 BAY VISTA DR
CLEARWATER, FL 33760

New Mailing Address:

FEI Number: 59-3279573 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

INZINA, THOMAS
16255 BAY VISTA DRIVE
CLEARWATER, FL 33760 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: PD
Name: MASON, STEPHEN R
Address: 16255 BAY VISTA DR
City-St-Zip: CLEARWATER, FL 33760

Title: D
Name: INZINA, THOMAS
Address: 16255 BAY VISTA DRIVE
City-St-Zip: CLEARWATER, FL 33760

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: THOMAS INZINA EVP 03/21/2011
Electronic Signature of Signing Officer or Director Date