

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N98000002576

FILED
Apr 21, 2002 8:00 AM
Secretary of State

Entity Name: BEHAVIOR ANALYST CERTIFICATION BOARD, INC.

Current Principal Place of Business:

519 E PARK AVE
TALLAHASSEE, FL 32301

New Principal Place of Business:

Current Mailing Address:

519 E PARK AVE
TALLAHASSEE, FL 32301

New Mailing Address:

FEI Number: 59-3514321

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SHOOK, GERALD L
519 E PARK AVE
TALLAHASSEE, FL 32301 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: P () Delete
Name: JOHNSTON, JAMES M
Address: 187 LEE RD., 820
City-St-Zip: OPELIKA, AL 36804

Title: D () Delete
Name: HEMINGWAY, MICHAEL J
Address: 1317 WINEWOOD BLVD.
City-St-Zip: TALLAHASSEE, FL 32301

Title: D () Delete
Name: BAILEY, JON S
Address: 2213 N. BONAPARTE DR.
City-St-Zip: TALLAHASSEE, FL 32308

Title: D () Delete
Name: LEBEC, LEAH
Address: 10 LAUDER LANE
City-St-Zip: GREENWICH, CT 06831

Title: S () Delete
Name: SHOOK, GERALD L
Address: 519 E. PARK AVE.
City-St-Zip: TALLAHASSEE, FL 32301

Title: D () Delete
Name: PARTINGTON, JAMES
Address: 115 JULIAN WAY
City-St-Zip: PLEASANT HILL, CA 94523 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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 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: GERALD L SHOOK, PH.D.

S

04/21/2002

Electronic Signature of Signing Officer or Director

Date

GREEN, GINA (D)
2255 CAMINO DEL RIO SOUTH
SAN DIEGO, CA 92108

JACOBSON, JOHN (T)
44 HOLLAND AVENUE
ALBANY, NY 12229-0001

GREEN, GINA (D)
2255 CAMINO DEL RIO SOUTH
SAN DIEGO, CA 92108

JACOBSON, JOHN (T)
44 HOLLAND AVENUE
ALBANY, NY 12229-0001