

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000002576

FILED  
Jan 05, 2006  
Secretary of State

Entity Name: BEHAVIOR ANALYST CERTIFICATION BOARD, INC.

## Current Principal Place of Business:

METRO BUILDING, SUITE 102  
1705 METROPOLITAN BLVD.  
TALLAHASSEE, FL 32308

## New Principal Place of Business:

## Current Mailing Address:

METRO BUILDING, SUITE 102  
1705 METROPOLITAN BLVD.  
TALLAHASSEE, FL 32308

## 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 DR  
METRO BUILDING, SUITE 102  
1705 METROPOLITAN BLVD.  
TALLAHASSEE, FL 32308 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 DR  
Address: 187 LEE RD., 820  
City-St-Zip: OPELIKA, AL 36804

Title: D ( ) Delete  
Name: GREEN, GINA DR  
Address: 8037 DEERFIELD STREET  
City-St-Zip: SAN DIEGO, CA 92120

Title: D ( ) Delete  
Name: MARTINEZ-DIAZ, JOSE DR  
Address: 150 WEST UNIVERSITY DRIVE  
City-St-Zip: MELBOURNE, FL 32901 69

Title: D ( ) Delete  
Name: CAMAZINE, SCOTT DR  
Address: 310 WEST MAIN STREET  
City-St-Zip: BOALSBURG, PA 16827, PA 16827

Title: S ( ) Delete  
Name: SHOOK, GERALD L DR  
Address: 7009 DUCK COVE ROAD  
City-St-Zip: TALLAHASSEE, FL 32312

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

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: JOHNSTON, JAMES M DR  
Address: 187 LEE ROAD 820  
City-St-Zip: OPELIKA, AL 36804

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

Title: T (X) Change ( ) Addition  
Name: MARTINEZ-DIAZ, JOSE DR  
Address: 150 WEST UNIVERSITY DRIVE  
City-St-Zip: MELBOURNE, FL 32901

Title: D (X) Change ( ) Addition  
Name: NILL, JENNICA  
Address: 12 HAMPTON DRIVE  
City-St-Zip: CENTER MORICHES, NY 11934

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 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: GERALD L SHOOK, PH.D., BCBA

S

01/05/2006

Electronic Signature of Signing Officer or Director

Date