

# 2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N98000002576

FILED  
Mar 27, 2003  
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:

3323 THOMASVILLE ROAD  
SUITE B  
TALLAHASSEE, FL 32308

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:

SHOOK, GERALD L DR  
7009 DUCK COVE ROAD  
TALLAHASSEE, FL 32312 US

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: DR GERALD L SHOOK

03/27/2003

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

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

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

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

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

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

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: DR GERALD L SHOOK

S

03/27/2003

Electronic Signature of Signing Officer or Director

Date

DR GINA GREEN D  
THE INSTITUTE FOR EFFECTIVE EDUCATION  
2255 CAMINO DEL RIO SOUTH  
SAN DIEGO, CA 92108

DR JOHN JACOBSON TR  
OMRDD PLANNING & SERVICE DESIGN  
44 HOLLAND AVENUE  
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