

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000003892

FILED
Feb 17, 2011
Secretary of State

Entity Name: BEHAVIOR ANALYSIS AND THERAPY, INC.

Current Principal Place of Business:

8001 SW 36 STREET
9
DAVIE, FL 33328

New Principal Place of Business:

8001 SW 36 STREET
9
DAVIE, FL 33328 US

Current Mailing Address:

8001 SW 36 STREET
9
DAVIE, FL 33328

New Mailing Address:

8001 SW 36 STREET
9
DAVIE, FL 33328 US

FEI Number: 65-0842110

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

STARIN, STEPHEN DR.
1012 SPOONBILL CIRCLE
WESTON, FL 33326 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: DR.
Name: STARIN, STEPHEN
Address: 1012 SPOONBILL CIRCLE
City-St-Zip: WESTON, FL 33326 US

Title: MRS.
Name: MARUSSICH, SILVIA
Address: 1012 SPOONBILL CIRCLE
City-St-Zip: WESTON, FL 33326 US

Title: MS.
Name: HULSEY, ROBIN
Address: 34 GABLES BLVD.
City-St-Zip: WESTON, FL 33326 US

Title: MR.
Name: GARCIA, DAVID
Address: 16344 SW 30TH ST.
City-St-Zip: MIRAMAR, FL 33027 US

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: STEPHEN STARIN

DR.

02/17/2011

Electronic Signature of Signing Officer or Director

Date