

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000001603

FILED  
Feb 18, 2010  
Secretary of State

**Entity Name:** GREATER MIAMI BEHAVIORAL HEALTHCARE CENTER, INC.

**Current Principal Place of Business:**

7000 NW 52 STREET  
MIAMI, FL 33166

**New Principal Place of Business:**

**Current Mailing Address:**

7000 NW 52 STREET  
MIAMI, FL 33166

**New Mailing Address:**

**FEI Number:** 65-0680155

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

BUTLER, HARVIE N  
2405 RIVERLANE TERRACE  
FT. LAUDERDALE, FL 33312 US

**Name and Address of New Registered Agent:**

BUTLER, DEAN A  
2405 RIVERLANE TERRACE  
FT. LAUDERDALE, FL 33312 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: DEAN A BUTLER

02/18/2010

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: DCEO  
Name: BUTLER, HARVIE N  
Address: 2405 RIVERLANE TERRACE  
City-St-Zip: FT. LAUDERDALE, FL 33312

Title: D  
Name: BUTLER, DEAN A  
Address: 2405 RIVERLANE TERRACE  
City-St-Zip: FT. LAUDERDALE, FL 33312

Title: D  
Name: MORA, IRINA  
Address: 14325 S.W. 155 COURT  
City-St-Zip: MIAMI, FL 33196

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: DEAN A BUTLER

D

02/18/2010

Electronic Signature of Signing Officer or Director

Date