

# 2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P00000037441

**FILED**  
**Oct 15, 2009**  
**Secretary of State**

**Entity Name:** PERSONAL GROWTH BEHAVIORAL HEALTH, INC.

**Current Principal Place of Business:**

710 OAKFIELD DRIVE  
STE 145  
BRANDON, FL 33511

**New Principal Place of Business:**

1210 MILLENNIUM PARKWAY  
SUITE 2010  
BRANDON, FL 33511

**Current Mailing Address:**

710 OAKFIELD DRIVE  
STE 145  
BRANDON, FL 33511

**New Mailing Address:**

1210 MILLENNIUM PARKWAY  
SUITE 2010  
BRANDON, FL 33511

**FEI Number:** 59-3644198

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

WHITE, MICHAEL LMHC  
710 OAKFIELD DRIVE  
STE 145  
BRANDON, FL 33511 US

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

WHITE, MICHAEL LMHC  
1210 MILLENNIUM PARKWAY  
SUITE 2110  
BRANDON, FL 33511 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: MICHAEL WHITE

10/15/2009

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PTD ( ) Delete  
Name: WHITE, MICHAEL LMHC  
Address: 710 OAKFIELD DRIVE STE 145  
City-St-Zip: BRANDON, FL 33511

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PTD (X) Change ( ) Addition  
Name: WHITE, MICHAEL LMHC  
Address: 1210 MILLENNIUM PARKWAY SUITE 2010  
City-St-Zip: BRANDON, FL 33511

I hereby certify that the information supplied with this filing does not qualify 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MICHAEL WHITE

PDT

10/15/2009

Electronic Signature of Signing Officer or Director

Date