

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000103520

FILED
Jan 21, 2007
Secretary of State

Entity Name: BEHAVIORAL HEALTHCARE CONSULTING, INC.

Current Principal Place of Business:

8509 NW 57 DR
CORAL SPRINGS, FL 33067

New Principal Place of Business:

6619 NW 97TH LANE
PARKLAND, FL 33076

Current Mailing Address:

8509 NW 57 DR
CORAL SPRINGS, FL 33067

New Mailing Address:

6619 NW 97TH LANE
PARKLAND, FL 33076

FEI Number: 65-1146809

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

IVERS, RICHARD A
2699 STARLING ROAD
FORT LAUDERDALE, FL 33312 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: GOODSTAT, ALAN
Address: 8509 NW 57TH DR
City-St-Zip: CORAL SPRINGS, FL 33067

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: GOODSTAT, ALAN
Address: 6619 NW 97TH LANE
City-St-Zip: PARKLAND, FL 33076

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ALAN GOODSTAT

D

01/21/2007

Electronic Signature of Signing Officer or Director

Date