

2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P02000044275

Entity Name: BEHAVIOR ARCHITECTS, INC.

FILED
Feb 02, 2005
Secretary of State

Current Principal Place of Business:

1525 WILBAR CIR
WINTER PARK, FL 32789

New Principal Place of Business:

124 NORTH CLARA AVENUE
DELAND, FL 32720

Current Mailing Address:

1025 FOSTER ROAD
SEBASTIAN, FL 32958

New Mailing Address:

124 NORTH CLARA AVENUE
DELAND, FL 32720

FEI Number: 41-2038510

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

HAGEROTT, GAIL I
1025 FOSTER ROAD
SEBASTIAN, FL 32958 US

Name and Address of New Registered Agent:

TITUS, SHARON K
124 NORTH CLARA AVENUE
DELAND, FL 32720 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: SHARON K. TITUS

02/02/2005

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: T () Delete
Name: HAGEROTT, GAIL I
Address: 1025 FOSTER ROAD
City-St-Zip: SEBASTIAN, FL 32958 US

Title: P (X) Delete
Name: TITUS, SHARI
Address: 1525 WILBAR CIRCLE
City-St-Zip: WINTER PARK, FL 32789 US

Title: V (X) Delete
Name: HAGEROTT, JON
Address: 1025 FOSTER ROAD
City-St-Zip: SEBASTIAN, FL 32958

Title: S (X) Delete
Name: ROBINSON, WILLIAM
Address: 2080 GERONIMO TRAIL
City-St-Zip: MAITLAND, FL 32751 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: S (X) Change () Addition
Name: MCNAMARA, DIANA L
Address: 512 WEST NEW YORK AVENUE
City-St-Zip: DELAND, FL 32720 US

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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

SIGNATURE: DIANE L. MCNAMARA

S

02/02/2005

Electronic Signature of Signing Officer or Director

Date