

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000082696

Entity Name: BEHAVIORS PLUS, INC.

FILED  
Jan 23, 2008  
Secretary of State

**Current Principal Place of Business:**

40438 EMERALDA ISLAND RD  
LEESBURG, FL 34788

**New Principal Place of Business:**

**Current Mailing Address:**

40438 EMERALDA ISLAND RD  
LEESBURG, FL 34788

**New Mailing Address:**

FEI Number: 54-2064615

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

LONG, VIRGINIA D  
40043 WEST 8TH AVE.  
UMATILLA, FL 32784 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: VP ( ) Delete  
Name: LONG, VIRGINIA D  
Address: 40043 WEST 8TH AVE.  
City-St-Zip: UMATILLA, FL 32784

Title: PD ( ) Delete  
Name: SULLIVAN, JODI L  
Address: 40438 EMERALDA ISLAND RD.  
City-St-Zip: LEESBURG, FL 34788

Title: DO ( ) Delete  
Name: TAYLOR, REGINALD  
Address: 40438 EMERALDA ISLAND ROAD  
City-St-Zip: LEESBURG, FL 34788

Title: D ( ) Delete  
Name: PAPINEAU, MAHLEE  
Address: 40438 EMERALDA ISLAND RD  
City-St-Zip: LEESBURG, FL 34788

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

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

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 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: VIRGINIA D LONG

VP

01/23/2008

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date