## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P04000021670

FILED Jan 04, 2007 Secretary of State

Entity Name: CREATIVE SOLUTIONS TO BEHAVORIAL MANAGEMENT INCORPORATED

Current Principal Place of Business:		New Principal Place of Business:		
	D 64 EAST ON, FL 34208			
Current N	lailing Addres	s:	New Mailing Addres	s:
	D 64 EAST ON, FL 34208			
El Number	: 34-1978100	FEI Number Applied For()	FEI Number Not Applicable ( )	Certificate of Status Desired (X)
Name and	Address of C	urrent Registered Agent:	Name and Address of	of New Registered Agent:
	EN, LENA TE ROAD 64 E TON, FL 34208			
	named entity see of Florida.	submits this statement for the p	ourpose of changing its registere	ed office or registered agent, or both,
	e of Florida.	submits this statement for the p	ourpose of changing its registere	ed office or registered agent, or both,
n the Stat	e of Florida.	submits this statement for the particles in the particles in Signature of Registered Agreement for the particles in the particle in the particles in the particle in the particles in the particles in the particles in the particles in the particle in the particles in the particles in the particles in the particle in the particles in the particle in the particle in the particles in the particle in the par		ed office or registered agent, or both,  Date
n the State	e of Florida. RE: Electron			
n the State	e of Florida. RE: Electron	ic Signature of Registered Ag	ent	
n the State	e of Florida.  RE: Electron  mpaign Financing  S AND DIREC	ic Signature of Registered Aggrups of Trust Fund Contribution ( ).  TORS:  Delete ENA WEST	ent	Date
n the State BIGNATUI  Election Car  DFFICER  Title: Name: Address:	e of Florida.  RE:  Electron  mpaign Financing  S AND DIREC  P ()  THORESEN, LE 2301 64TH ST V  BRADENTON, F	ic Signature of Registered Agr y Trust Fund Contribution ( ).  TORS:  Delete ENA WEST EL 34209  Delete EISTOPHER WN CIRCLE	ent  ADDITIONS/CHANG  Title: Name: Address:	Date ES TO OFFICERS AND DIRECTORS

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: LENA THORESEN P 01/04/2007