2006 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P05000111327

Entity Name: HARMONY BEHAVIORAL HEALTH, INC.

Apr 07, 2006 Secretary of State

Current Principal Place of Business:	New Principal Place of Business

8735 HENDERSON RD RENAISSANCE TWO 8725 HENDERSON RD TAMPA, FL 33634 RENAISSANCE TWO

TAMPA, FL 33634

Current Mailing Address: New Mailing Address:

8735 HENDERSON RD RENAISSANCE TWO 8735 HENDERSON RD TAMPA, FL 33634 RENAISSANCE TWO

TAMPA, FL 33634

FEI Number: 20-3320236 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

CORPORATION SERVICE COMPANY CORPORATION SERVICE COMPANY 11201 HAYS ST 1201 HAYS ST US

TALLAHASSEE, FL 32301 TALLAHASSEE, FL 32301 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: 04/07/2006

> Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Name:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: (X) Change () Addition () Delete Title:

FARHA, TODD S Name: Name: FARHA, TODD S

8735 HENDERSON RD RENAISSANCE TWO Address: 8735 HENDERSON RD RENAISSANCE TWO Address:

City-St-Zip: TAMPA, FL 33634 City-St-Zip: **TAMPA FL 33634**

Title: Title: D/Τ () Delete (X) Change () Addition

Name: BEHRENS, PAUL L Name: BEHRENS, PAUL L

8735 HENDERSON RD RENAISSANCE TWO 8735 HENDERSON RD RENAISSANCE TWO Address: Address:

TAMPA, FL 33634 TAMPA, FL 33634 City-St-Zip: City-St-Zip:

() Delete Title: Title: (X) Change () Addition D/S BEREDAY, THADDEUS BEREDAY, THADDEUS Name: Name:

8735 HENDERSON RD RENAISSANCE TWO 8735 HENDERSON RD RENAISSANCE TWO Address: Address:

City-St-Zip: TAMPA, FL 33634 City-St-Zip: TAMPA, FL 33634

Title: () Delete Title: D/VP (X) Change () Addition

SMITH, DAVID SMITH, DAVID Name:

Address: 8735 HENDERSON RD RENAISSANCE TWO Address: 8735 HENDERSON RD RENAISSANCE TWO

City-St-Zip: TAMPA, FL 33634 City-St-Zip: TAMPA, FL 33634

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: THADDEUS BEREDAY 04/07/2006 S