

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000160700

FILED
Apr 15, 2009
Secretary of State

Entity Name: AVENTURA COMMUNITY MENTAL HEALTH CENTER, INC.

Current Principal Place of Business:

1767 NE 162 ST
NORTH MIAMI, FL 33162

New Principal Place of Business:

Current Mailing Address:

1741 NE 198 TERR.
NORTH MIAMI BEACH, FL 33179

New Mailing Address:

FEI Number: 56-2558247

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BENDER, ELIZABETH
1741 NE 198 TERR
NORTH MIAMI BEACH, FL 33179 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: PD () Delete
Name: BENDER, ELIZABETH
Address: 1741 NE 198 TERR.
City-St-Zip: NORTH MIAMI BEACH, FL 33179

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: ELIZABETH BENDER

P /D

04/15/2009

Electronic Signature of Signing Officer or Director

Date