

2008 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P06000044102

FILED
Sep 06, 2008
Secretary of State

Entity Name: BEHAVIORAL STRATEGIES, CORP

Current Principal Place of Business:

115 EAST LANCASTER RD
SUITE
ORLANDO, FL 32809

New Principal Place of Business:

672 NORTH SEMORAN BLVD.
SUITE 304
ORLANDO, FL 32807

Current Mailing Address:

115 EAST LANCASTER RD
SUITE
ORLANDO, FL 32809

New Mailing Address:

13636 PODOCARPUS LANE
ORLANDO, FL 32828

FEI Number: 20-4576011

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

GOMES, LUCIA
115 EAST LANCASTER RD
SUITE
ORLANDO, FL 32809 US

Name and Address of New Registered Agent:

GOMES, LUCIA
13636 PODOCARPUS LANE
ORLANDO, FL 32828 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: LUCIA GOMES

09/06/2008

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: P () Delete
Name: GOMES, LUCIA
Address: 115 EAST LANCASTER RD SUITE
City-St-Zip: ORLANDO, FL 32809

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VP (X) Change () Addition
Name: GOMES, LUCIA
Address: 13636 PODOCARPUS LANE
City-St-Zip: ORLANDO, FL 32828

Title: P () Change (X) Addition
Name: BROST, GERARD
Address: 13636 PODOCARPUS LANE
City-St-Zip: ORLANDO, FL 32828

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: LUCIA GOMES

VP

09/06/2008

Electronic Signature of Signing Officer or Director

Date