

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000058197

FILED  
Jan 09, 2011  
Secretary of State

**Entity Name:** PROACTIVE BEHAVIOR SOLUTIONS, INC.

**Current Principal Place of Business:**

2460 NORTHSIDE DR  
#1303  
CLEARWATER, FL 33761 US

**New Principal Place of Business:**

**Current Mailing Address:**

2460 NORTHSIDE DR  
#1303  
CLEARWATER, FL 33761 US

**New Mailing Address:**

**FEI Number:** 20-4776968

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

GINGRAS, CHRISTINA M PRES  
2460 NORTHSIDE DR #1303  
CLEARWATER, FL 33761 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

**OFFICERS AND DIRECTORS:**

Title: P  
Name: GINGRAS, CHRISTINA  
Address: 2460 NORTHSIDE DR #1303  
City-St-Zip: CLEARWATER, FL 33761 US

Title: VP  
Name: HORNE, GLENDA  
Address: 1589 AMBERLEA DR. N  
City-St-Zip: DUNEDIN, FL 34698 US

Title: S  
Name: GABLER, COURTNEY  
Address: 1207 CORDOVA GREENS  
City-St-Zip: LARGO, FL 33777 US

Title: T  
Name: PALKA, JENNIFER  
Address: 2460 NORTHSIDE DR. #1501  
City-St-Zip: CLEARWATER, FL 33761 US

I hereby 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 all other like empowered.

SIGNATURE: CHRISTINA GINGRAS

PRES

01/09/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date