2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 25, 2009
Secretary of State

DOCUMENT# P06000118717

Entity Name: ATLAS BEHAVIORAL HEALTH PA

Current Principal Place of Business:

124 BELLEAIRE DRIVE
PALM COAST, FL 32137 US

New Principal Place of Business:

21 OLD KINGS RD. N. STE. B-208
PALM COAST, FL 32137 US

Current Mailing Address:

WEST POINT PLAZA
4865 PALM COAST PARKWAY NW, #4
PALM COAST, FL 32137

New Mailing Address:

21 OLD KINGS RD. N. STE. B-208
PALM COAST, FL 32137 US

FEI Number: 20-5544598 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

VACCHELLI, KATHLEEN A
124 BELLEAIRE DRIVE
PALM COAST, FL 32137 US

Name and Address of New Registered Agent:

VACCHELLI, KATHLEEN A
21 OLD KINGS RD. N.
SUITE B-208
PALM COAST, FL 32137 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: KATHLEEN VACCHELLI 02/25/2009
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: VACCHELLI, KATHLEEN A
Address: 124 BELLEAIRE DRIVE
City-St-Zip: PALM COAST, FL 32137 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: VACCHELLI, KATHLEEN A
Address: 21 OLD KINGS RD. N. STE. B-208
City-St-Zip: PALM COAST, FL 32137 US

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: KATHLEEN VACCHELLI P 02/25/2009
Electronic Signature of Signing Officer or Director Date