2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 15, 2009
Secretary of State

DOCUMENT# P06000119894

Entity Name: BEHAVIORAL LEARNING SYSTEMS, INC.

Current Principal Place of Business:

21520 S.E. 72ND LANE
HAWTHORNE, FL 32640

New Principal Place of Business:

1409 N.W. 6TH STREET
SUITE 120
GAINESVILLE, FL 32601 22

Current Mailing Address:

P. O. BOX 513
HAWTHORNE, FL 32640

New Mailing Address:

1409 N.W. 6TH STREET
SUITE 120
GAINESVILLE, FL 32601 22

FEI Number: 20-5608606 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

LASH, ROBERT A
500 E. UNIVERSITY AVENUE
SUITE A
GAINESVILLE, FL 32602 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: OWNE ( ) Delete
Name: PULCINI, JANICE G
Address: P. O. BOX 513
City-St-Zip: HAWTHORNE, FL 32640

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: JANICE GABOURY PULCINI OWNE 04/15/2009

Electronic Signature of Signing Officer or Director Date