

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000128806

FILED  
Jul 05, 2007  
Secretary of State

Entity Name: ADAPT BEHAVIORAL SERVICES, P.A.

## Current Principal Place of Business:

459 MINNEHANA ROAD  
MAITLAND, FL 32751

## New Principal Place of Business:

459 MINNEHAHA ROAD  
MAITLAND, FL 32751

## Current Mailing Address:

459 MINNEHANA ROAD  
MAITLAND, FL 32751

## New Mailing Address:

459 MINNEHAHA ROAD  
MAITLAND, FL 32751

FEI Number: 20-5708619

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

OLDER, SHARON E  
459 MINNEHANA ROAD  
MAITLAND, FL 32751 US

## Name and Address of New Registered Agent:

OLDER, SHARON E  
459 MINNEHAHA ROAD  
MAITLAND, FL 32751 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: SHARON OLDER

07/05/2007

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: PRES ( ) Delete  
Name: WAGNER, KAREN  
Address: 4365 HORSE SHOE BEND  
City-St-Zip: MERRITT ISLAND, FL 32953

Title: VP ( ) Delete  
Name: WAGNER, KAREN  
Address: 4365 HORSE SHOE BEND  
City-St-Zip: MERRITT ISLAND, FL 32953

Title: SEC ( ) Delete  
Name: WAGNER, KAREN  
Address: 4365 HORSE SHOE BEND  
City-St-Zip: MERRITT ISLAND, FL 32953

Title: TREA ( ) Delete  
Name: WAGNER, KAREN  
Address: 4365 HORSE SHOE BEND  
City-St-Zip: MERRITT ISLAND, FL 32953

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: KAREN WAGNER

PRES

07/05/2007

Electronic Signature of Signing Officer or Director

Date