2009 FOR PROFIT CORPORATION REINSTATEMENT

FILED
Oct 12, 2009
Secretary of State

DOCUMENT# P08000083341

Entity Name: CREATIVE SOLUTIONS BEHAVIORAL HEALTH, INC.

Current Principal Place of Business:

94 SAN BLAS AVE
KISSIMMEE, FL 34743

New Principal Place of Business:

Current Mailing Address:

94 SAN BLAS AVE
KISSIMMEE, FL 34743

New Mailing Address:

FEI Number: 94-3449432 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

MULTARI, SYLVIA H
94 SAN BLAS AVE
KISSIMMEE, FL 34743 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: SYLVIA H. MULTARI
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: D ( ) Delete
Name: BEYE, JENNIFER J
Address: 1505 WINDMILL RDIGE LOOP
City-St-Zip: ORLANDO, FL 32828

Title: D ( ) Delete
Name: MULTARI, SYLVIA H
Address: 94 SAN BLAS AVE
City-St-Zip: KISSIMMMEE, FL 34743

Title: D ( ) Delete
Name: LUGO-MORALES, YASMIN
Address: 2015 MEADOW POND WAY
City-St-Zip: ORLANDO, FL 32824

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:

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: SYLVIA H. MULTARI DIR 10/12/2009
Electronic Signature of Signing Officer or Director Date