

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P11000066527

**FILED**  
**Aug 28, 2012**  
**Secretary of State**

**Entity Name:** HANCOCK BEHAVIOR SERVICES INC.

**Current Principal Place of Business:**

13819 CORNFLOWER COURT  
WELLINGTON, FL 33414

**New Principal Place of Business:**

**Current Mailing Address:**

13819 CORNFLOWER COURT  
WELLINGTON, FL 33414

**New Mailing Address:**

**FEI Number:** 45-2837829

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

HANCOCK, THOMAS  
13819 CORNFLOWER COURT  
WELLINGTON, FL 33414 US

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

HANCOCK, THOMAS B JR.  
13819 CORNFLOWER COURT  
WELLINGTON, FL 33414 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:** TOM HANCOCK JR.

08/28/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

**Title:** PD  
**Name:** HANCOCK, THOMAS B JR.  
**Address:** 13819 CORNFLOWER COURT  
**City-St-Zip:** WELLINGTON, FL 33414

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:** TOM HANCOCK JR.

PD

08/28/2012

Electronic Signature of Signing Officer or Director

Date