

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P95000073349

FILED
Apr 29, 2003
Secretary of State

Entity Name: CHRISTIAN BEHAVIORAL HEALTH SPECIALISTS, INC.

Current Principal Place of Business:

2231 N UNIVERSITY DR.
C
PEMBROKE PINES, FL 33204

New Principal Place of Business:

400 SOUTH DIXIE HIGHWAY
SUITE 7
HALLANDALE BEACH, FL 33009

Current Mailing Address:

2231 N UNIVERSITY DR.
C
PEMBROKE PINES, FL 33204

New Mailing Address:

400 SOUTH DIXIE HIGHWAY
SUITE 7
HALLANDALE BEACH, FL 33009

FEI Number: 65-0607594

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DETOURNILLON, PHILIP
2231 N. UNIVERSITY DR.
C
PEMBROKE PINES, FL 33204

Name and Address of New Registered Agent:

DETOURNILLON, PHILIP
400 SOUTH DIXIE HIGHWAY
SUITE 7
HALLANDALE BEACH, FL 33009

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:

04/29/2003

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: CANCHOLA, DENISE
Address: 2231 N UNIVERSITY SUITE C
City-St-Zip: PEMBROKE PINES, FL 33131

Title: T () Delete
Name: DETOURNILLON, P
Address: 2231 N. UNIVERSITY SUITE C
City-St-Zip: PEMBROKE, FL 33181

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: CANCHOLA, DENISE
Address: 400 SOUTH DIXIE SUITE 7
City-St-Zip: HALLANDALE BEACH, FL 33009

Title: T (X) Change () Addition
Name: DETOURNILLON, P
Address: 400 SOUTH DIXIE HIGHWAY SUITE 7
City-St-Zip: HALLANDALE BEACH, FL 33009

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: P DE TOURNILLON

T

04/29/2003

Electronic Signature of Signing Officer or Director

Date