

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000080629

FILED
Apr 18, 2007
Secretary of State

Entity Name: BEHAVIORAL SUPPORT SERVICES, INCORPORATED

Current Principal Place of Business:

315 N. LAKEMONT AVE.
STE. B
WINTER PARK, FL 32792

New Principal Place of Business:

Current Mailing Address:

8220 FIRENZE BLVD.
ORLANDO, FL 32836

New Mailing Address:

FEI Number: 59-3595260

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DUAN, WEILI
8220 FIRENZE BLVD.
ORLANDO, FL 32836 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: P () Delete
Name: DUAN, WEILI
Address: 8220 FIRENZE BLVD.
City-St-Zip: ORLANDO, FL 32836

Title: SVP () Delete
Name: SHAO, SHIYUAN
Address: 8220 FIRENZE BLVD.
City-St-Zip: ORLANDO, FL 32836

Title: T () Delete
Name: SHAO, SHIYUAN
Address: 8220 FIRENZE BLVD.
City-St-Zip: ORLANDO, FL 32836

Title: VP (X) Delete
Name: MEES, KATE
Address: 315 N. LAKEMONT AVE.
City-St-Zip: ORLANDO, FL 32792

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VP (X) Change () Addition
Name: SHAO, SHIYUAN
Address: 8220 FIRENZE BLVD.
City-St-Zip: ORLANDO, FL 32836

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 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: SHIYUAN SHAO

VP

04/18/2007

Electronic Signature of Signing Officer or Director

Date