2018 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000141028

Entity Name: NORTH FLORIDA BEHAVIORAL HEALTH PARTNERS, INC.

FILED Feb 14, 2018 Secretary of State CC7237305530

Current Principal Place of Business:

240 CORPORATE BLVD. NORFOLK, VA 23502

Current Mailing Address:

240 CORPORATE BLVD. NORFOLK, VA 23502

FEI Number: 20-1847098 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301-2525 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:

Electronic Signature of Registered Agent

Date

Officer/Director Detail:

Title DIRECTOR/SECRETARY Title DIRECTOR/TREASURER

NameLABARTA, MARGARITANameCHERRY, JON TAddress4800 SW 13TH ST.Address2020 TALLY ROADCity-State-Zip:GAINESVILLE FL 32608City-State-Zip:LEESBURG FL 34748

Title DIRECTOR Title DIRECTOR

NameLEE, KARENNameCOWART, TIMOTHYAddress240 CORPORATE BLVD.Address8906 BRITTANY WAYCity-State-Zip:NORFOLK VA 23502City-State-Zip:TAMPA FL 33619-4306

Title PRESIDENT/DIRECTOR Title VP

Name FLOWE, ROBERT C Name RISKU, DANIEL M

Address 240 CORPORATE BLVD. Address 240 CORPORATE BLVD.

City-State-Zip: NORFOLK VA 23502 City-State-Zip: NORFOLK VA 23502

Title ASSISTANT SECRETARY
Name WHITE, REBECCA H
Address 240 CORPORATE BLVD.
City-State-Zip: NORFOLK VA 23502

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: DANIEL M RISKU VICE PRESIDENT 02/14/2018