

2017 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F14000001619

Entity Name: RESCARE BEHAVIOR SERVICES, INC.**Current Principal Place of Business:**9901 LINN STATION ROAD
LOUISVILLE, KY 40223**Current Mailing Address:**9901 LINN STATION ROAD
LOUISVILLE, KY 40223**FEI Number:** 61-1297942**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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 & PRESIDENT
Name RUSSELL, DOUGLAS
Address 9901 LINN STATION ROAD
City-State-Zip: LOUISVILLE KY 40223

Title DVP
Name FLORES, JAIME J
Address 9901 LINN STATION ROAD
City-State-Zip: LOUISVILLE KY 40223

Title ASSISTANT TREASURER
Name FISHER, KEVIN G
Address 9901 LINN STATION ROAD
City-State-Zip: LOUISVILLE KY 40223

Title DT
Name VARNEY, JOLENE L
Address 9901 LINN STATION ROAD
City-State-Zip: LOUISVILLE KY 40223

Title S
Name REED, STEVEN S
Address 9901 LINN STATION ROAD
City-State-Zip: LOUISVILLE KY 40223

Title DIRECTOR & VICE PRESIDENT
Name BURKHART-WILSON, TABITHA
Address 9901 LINN STATION ROAD
City-State-Zip: LOUISVILLE KY 40223

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: STEVEN S. REED**SECRETARY****01/03/2017**

Electronic Signature of Signing Officer/Director Detail

Date