

**2023 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P22000041729

**Entity Name:** BEHAVIORAL HEALTH ADVISORS INC

**Current Principal Place of Business:**

7609 CEDAR HURST CT  
LAKE WORTH, FL 33467

**Current Mailing Address:**

7609 CEDAR HURST CT  
LAKE WORTH, FL 33467

**FEI Number: 88-2357994**

**Certificate of Status Desired: Yes**

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

LAPLANTE, RICHARDSON  
7609 CEDAR HURST CT  
LAKE WORTH, FL 33467 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 CEO  
Name LAPLANTE, RICHARDSON  
Address 7609 CEDAR HURST CT  
City-State-Zip: LAKE WORTH FL 33467

Title CHIEF CLINICAL OFFICER  
Name TOUSSAINT, TAINA BCBA  
Address 621 SW 6TH TER  
City-State-Zip: HALLANDALE FL 33009

*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: RICHARDSON LAPLANTE**

**CEO**

**01/10/2023**

Electronic Signature of Signing Officer/Director Detail

Date