

1.) CORPORATION NAME: Anka Behavioral Health, Incorporated	DUE DATE: 9/30/2012
2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: NORTHWEST REGISTERED AGENT LLC 4445 CORPORATION LN STE 264 VIRGINIA BEACH, VA 23462	SCC ID NO: F1872847
3.) CITY OR COUNTY OF VA REGISTERED OFFICE: VIRGINIA BEACH CITY	5.) STOCK INFORMATION CLASS <input type="text"/> AUTHORIZED <input type="text"/>
4.) STATE OR COUNTRY OF INCORPORATION: CA	

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 1850 GATEWAY BLVD.
SUITE 900

CITY/ST/ZIP: CONCORD, CA 94520

7.) DIRECTORS AND PRINCIPAL OFFICERS: All directors and principal officers must be listed. An individual may be designated as both a director and an officer.

	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: John Stimson		
TITLE: PRESIDENT		
ADDRESS: 1850 GATEWAY BOULEVARD		
CITY/ST/ZIP/CO: SUITE 900 CONCORD, CA 94520		

	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: CHRIS WITHROW		
TITLE: CEO		
ADDRESS: 1850 GATEWAY BLVD.		
CITY/ST/ZIP/CO: SUITE 900 CONCORD, CA 94520		

	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: NAJA BOYD		
TITLE: COO		
ADDRESS: 1850 GATEWAY BLVD.		
CITY/ST/ZIP/CO: CONCORD, CA 94520		

	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: Leny Dayco		
TITLE: Controller		
ADDRESS: 1850 GATEWAY BLVD.		
CITY/ST/ZIP/CO: SUITE 900 CONCORD, CA 94520		

I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.

/s/ CHRIS WITHROW	CHRIS WITHROW, CEO	7/23/2012
SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	PRINTED NAME AND CORPORATE TITLE	DATE

It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.