



THE SCHOOL DISTRICT OF PALM BEACH COUNTY
Beneficial Interest and Disclosure of Ownership Affidavit

Bid No. _____ Project No./ Title Speech - Language Pathology
Corporate Name EBS Healtcare Tax FEIN No. 23-2720862

Before me, the undersigned authority, personally appeared, JOHN GUMPERT, ("Corporate Representative") this _____ day of August, 2006, who, first being duly sworn, as required by law, subject to the penalties prescribed for perjury, deposes and says:

- 1) Corporate Representative has read the contents of this Affidavit, has actual knowledge of the facts contained herein, and states that the facts contained herein are true, correct, and complete.
2) The following is a list of every "person" (as defined in Section 1.01(3), Florida Statutes to include individuals, children firms, associates, joint adventures, partnerships, estates, trusts, business trusts, syndicates, fiduciaries, corporations and all other groups and combinations) holding 5% or more of the beneficial interest in the disclosing entity: (If more space is needed, attach separate sheet)

A. Persons or corporate entities owning 5% or more:

Table with 3 columns: Name, Address, Percentage. Row 1: Mark Stubits, P.O. Box 911, Concordville, PA 19331, 100%.

B. Persons or corporate entities who hold by proxy the voting power of 5% or more:

Table with 3 columns: Name, Address, Percentage. (Empty rows)

C. Stock held for others and for whom held:

Table with 3 columns: Name, Address, Percentage. (Empty rows)

CORPORATE REPRESENTATIVE

By: John Gumpert

SWORN TO and subscribed before me this 17 day of August, 2006, by John Gumpert. Such person(s) (Notary Public must check applicable box).

[] is/are personally known to me. [x] produced a current driver license(s). [] produced _____ as identification.

(NOTARY PUBLIC SEAL)

Notarial Seal
James M. Nowlin, Notary Public
Chadds Ford Twp., Delaware County
My Commission Expires Oct. 8, 2006
Member, Pennsylvania Association of Notaries

James M. Nowlin
Notary Public
JAMES M. NOWLIN
(Print, Type or Stamp Name of Notary Public)