2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 20, 2008 8:00 am
Secretary of State
03-20-2008 90029 027 ****70.00

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1. Entity Name
THE CANAAN RECOVERY FOUNDATION, INC.

Principal Place of Business	Mailing Address
3218 BAY ESTATES DRIVE DESTIN, FL 32550	3218 BAY ESTATES DRIVE DESTIN, FL 32550

03102008 Chg-NP CR2E037 (12/06)

2. Principal Place of Business - No P.O. Box #	3. Mailing Address
4156 HWY 20 EAST	P.O. BOX 818
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: FREEPORT, FL	City & State: FREEPORT, FLA.
Zip: 32439 Country: WALTON	Zip: 32439 Country: WALTON

4. FEI Number 26-1860103 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☒ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
EARLES, CHARLES E 3218 BAY ESTATES DRIVE DESTIN, FL 32550	Name: JOHN R. BROUSSARD Street Address (P.O. Box Number is Not Acceptable): 388 BAYOU CIRCLE City: FREEPORT FL Zip Code: 32439

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

Filing Fee is $61.25
Due by May 1, 2008

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make check payable to Florida Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD BROUSSARD, JOHN R 388 BAYOU CIRCLE FREEPORT, FL 32439	☐ Delete	VD BROUSSARD, JOHN R 388 BAYOU CIRCLE FREEPORT, FL 32439	☒ Change	☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD EARLES, CHARLES E 3218 BAY ESTATES DRIVE DESTIN, FL 32550	☐ Delete	PD EARLES, CHARLES E. 3218 BAY ESTATES DR DESTIN FL 32550	☒ Change	☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D ARNETT, TOY 82 W COUNTRY CLUB DR. DESTIN, FL 32541	☒ Delete	SD MARCIA JOHNSON 258 HILLCREST RD SANTA ROSA BCH, FL 32548	☐ Change	☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D CHRISTENSEN, DICK 400 KELLY PLANTATION #902 DESTIN, FL 325418462	☐ Delete	D JENS BACH 169 EMERALD RIDGE SANTA ROSA BEACH, FL 32459	☐ Change	☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D CRUNK, JOHN 3018 CLUB DRIVE DESTIN, FL 32550	☐ Delete	P LARRY KUNKEL 3238 BAY ESTATES DR DESTIN FL 32550	☐ Change	☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D HENDRICKS, GEORGE 3234 BAY ESTATES DRIVE DESTIN, FL 32550	☐ Delete		☐ Change	☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: _____ JOHN R. BROUSSARD 3/18/2008 850-974-4573
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #