

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N35681

FILED
Mar 26, 2010
Secretary of State

Entity Name: PREVENTION, REHABILITATION, EDUCATION PROGRAMS, INC.

Current Principal Place of Business:

4711 N. HUBERT AVENUE
TAMPA, FL 33614 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 152928
TAMPA, FL 33684

New Mailing Address:

FEI Number: 59-2984442

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

JUSTICE, HELEN B
4711 N HUBERT AVE
TAMPA, FL 33614 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: P
Name: QUINN, PHILIP F DR
Address: 17017 SHADY PINES DR.
City-St-Zip: LUTZ, FL 33594

Title: D
Name: WILLIAMS, E.D.
Address: 11308 SANDPINE RD
City-St-Zip: RIVERVIEW, FL 33569

Title: S
Name: HAPNER, ELIZABETH
Address: 304 SOUTH PLANT AVENUE
City-St-Zip: TAMPA, FL 33618

Title: T
Name: VELONG, ANTHONY L
Address: 10922 GILETTE AVE
City-St-Zip: TEMPLE TERRACE, FL 33617

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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: DR. PHILIP F. QUINN

P

03/26/2010

Electronic Signature of Signing Officer or Director

Date