2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N39014

FILED Feb 13, 2012 Secretary of State

Entity Name: PHOENIX PROGRAMS OF FLORIDA, INC.

Current Principal Place of Business: New Principal Place of Business:

5501 WEST WATERS AVE.

SUITE 406

TAMPA, FL 33634 US

Current Mailing Address: New Mailing Address:

5501 WEST WATERS AVE. SUITE 406 TAMPA, FL 33634 US

FEI Number: 59-3172948 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

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

C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 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

OFFICERS AND DIRECTORS:

Γitle: VRD

Name: MCENEANEY, PATRICK B Address: 5501 W. WATERS AV., SUITE 406

City-St-Zip: TAMPA, FL 33634

Title:

Name: CAPITANO, SR, JOSEPH

Address: 5501 W. WATERS AV., SUITE 406

City-St-Zip: TAMPA, FL 33634

Title:

Name: COLLINS, JILL

Address: 5501 W. WATERS AV., SUITE 406

City-St-Zip: TAMPA, FL 33634

Title: C

Name: GOETSCHIUS, HERBERT

Address: 5501 W. WATERS AV., SUITE 406

City-St-Zip: TAMPA, FL 33634

Title: [

Name: ROVNER, STEVEN

Address: 5501 W. WATERS AV., SUITE 406

City-St-Zip: TAMPA, FL 33634

Title: [

Name: MURMAN, SANDRA

Address: 5501 W. WATERS AV., SUITE 406

City-St-Zip: TAMPA, FL 33634

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: MARIA ALVAREZ VP/D 02/13/2012