## 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## **DOCUMENT# 744231**

FILED Jan 27, 2012 Secretary of State

Entity Name: ABUSE COUNSELING AND TREATMENT, INC.

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

407-11 CENTER ROAD FT MYERS, FL 33907 US 407 CENTER ROAD FT MYERS, FL 33907 US

Current Mailing Address: New Mailing Address:

P.O. BOX 60401 FORT MYERS, FL 33906

FEI Number: 59-1864735 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:

JOHNSON, KATHLEEN PRES 5238 SW 2ND AVENUE CAPE CORAL, FL 33914 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:

 Name:
 CHAIPEL, STEVE

 Address:
 2625 SW 4TH PLACE

 City-St-Zip:
 CAPE CORAL, FL 33914

Title: VP

Name: BARBUR, DAVID

Address: 12995 S. CLEVELAND AVENUE, SUITE 145

City-St-Zip: FORT MYERS, FL 33907

Title: CEO

Name: BENTON, JENNIFER L L Address: 20 FALCONWOOD COURT City-St-Zip: FORT MYERS, FL 33919

Title:

 Name:
 LANGTON, MAALISA

 Address:
 2210 WIDMAN WAY

 City-St-Zip:
 FORT MYERS, FL 33901

Title:

 Name:
 WALLACE, DARREN

 Address:
 1715 MONROE STREET

 City-St-Zip:
 FORT MYERS, FL 33901

Title:

Name: MAZZARA, JUSTIN

Address: 1664 MCGREGOR RESERVE DRIVE

City-St-Zip: FORT MYERS, FL 33901

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: JENNIFER L. BENTON CEO 01/27/2012