2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 706019

Entity Name: ALCOHOLIC SERVICE CENTER INC

Current Principal Place of Business:

20 WEST 4TH STREET JACKSONVILLE, FL 32206

Current Mailing Address:

20 WEST 4TH STREET
JACKSONVILLE. FL 32206 US

FEI Number: 59-2919095 Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

HOLMBERG, TINA M 20 WEST 4TH STREET JACKSONVILLE, FL 32206 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: TINA M. HOLMBERG 01/09/2013

Electronic Signature of Registered Agent Date

Officer/Director Detail:

Title EXECUTIVE DIRECTOR Title DIRECTOR

Name HOLMBERG, TINA M Name DAVIS, MIKE

Address 20 WEST 4TH STREET Address 20 WEST 4TH STREET

City-State-Zip: JACKSONVILLE FL 32206 City-State-Zip: JACKSONVILLE FL 32206

City-State-Zip: JACKSONVILLE FL 32206 City-State-Zip: JACKSONVILLE FL 32206

TitleBOARD MEMBERTitleBOARD MEMBERNameGARNER, SUSANNameDAVIS, PATRICIA

Address 20 WEST 4TH STREET Address 20 WEST 4TH STREET

City-State-Zip: JACKSONVILLE FL 32206 City-State-Zip: JACKSONVILLE FL 32206

TitleBOARD MEMBERTitleBOARD MEMBERNameWHITE, BRADNameCLAXTON, JOHN

Address 20 WEST 4TH STREET Address 20 WEST 4TH STREET

City-State-Zip: JACKSONVILLE FL 32206 City-State-Zip: JACKSONVILLE FL 32206

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: TINA M. HOLMBERG

EXECUTIVE DIRECTOR

01/09/2013

FILED Jan 09, 2013

Secretary of State

CC5124920064