

2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 728992

Entity Name: ALCOHOLIC REHAB, INC.

Current Principal Place of Business:

2625 MARKET ST
JACKSONVILLE, FL 32206

Current Mailing Address:

2625 MARKET ST
JACKSONVILLE, FL 32206 US

FEI Number: 23-7410323

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ARENA, SAL
2625 MARKET ST
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: SAL ARENA

01/19/2015

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT, DIRECTOR
Name KOCH, KEN
Address 260 SARA DRIVE
City-State-Zip: JACKSONVILLE FL 32218

Title VP, DIRECTOR
Name CAREY, JOHN
Address 3610 TIMUQUANA RD
City-State-Zip: JACKSONVILLE FL 32210

Title TREASURER, DIRECTOR
Name ARENA, SAL
Address 1671 RIVER ROAD
City-State-Zip: JACKSONVILLE FL 32207

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: JOHN CAREY

VP, DIRECTOR

01/19/2015

Electronic Signature of Signing Officer/Director Detail

Date