2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

## Entity Name: AGENCY FOR COMMUNITY TREATMENT SERVICES, INC.

# **Current Principal Place of Business:**

4612 N 56TH ST TAMPA, FL 33610

#### **Current Mailing Address:**

4612 N 56TH ST TAMPA, FL 33610

## FEI Number: 59-1860626

## Name and Address of Current Registered Agent:

BROWN, RICHARD E 4612 N 56TH ST TAMPA, FL 33610 US Certificate of Status Desired: Yes

FILED Jan 08, 2014

Secretary of State

Date

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

## **Officer/Director Detail :**

Title	TREASURER	Title	DIRECTOR	
Name	HEARN, STEVEN	Name	HIRSCH, WILLIAM	
Address	4612 N 56TH ST	Address	4612 N 56TH STREET	
City-State-Zip:	TAMPA FL 33610	City-State-Zip:	TAMPA FL 33610	
Title	VP	Title	CEO	
Name	JACOB, JAMES	Name	BROWN, RICHARD	
Address	4612 N 56TH STREET	Address	4612 N. 56TH ST.	
City-State-Zip:	TAMPA FL 33610	City-State-Zip:	TAMPA FL 33610	
Title	S	Title	PRESIDENT	
Name	BATSCH, CATHERINE	Name	PREVITERA, JAMES D.	
Address	4612 NORTH 56TH ST	Address	4612 N. 56TH STREET	
City-State-Zip:	TAMPA FL 33610	City-State-Zip:	TAMPA FL 33610	

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: RICHARD E. BROWN

C.E.O.

01/08/2014

Electronic Signature of Signing Officer/Director Detail

Date