UNITED STATES CORPORATION AGENTS, INC. 13302 WINDING OAKS BLVD, SUITE A TAMPA, FL 33612 US

Name and Address of Current Registered Agent:

Entity Name: RECOVERY EPICENTER, INC.

Current Principal Place of Business:

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

2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

Officer/Director Detail :

DOCUMENT# N14000003132

1601 DELAWARE AVENUE, N.E. ST. PETERSBURG, FL 33703

Current Mailing Address:

FEI Number: 46-5272217

1601 DELAWARE AVENUE, N.E. ST. PETERSBURG, FL 33703 US

	Title	PRESIDENT, CHAIRMAN, DIRECTOR	Title	TREASURER, EXECUTIVE SECRETARY, DIRECTOR
	Name	SHELBY, IAN M		
	Address	2700 52ND AVENUE N	Name	BURNS, CATHY
	Address	104	Address	3930 59TH WAY, NORTH
	City-State-Zip:	SAINT PETERSBURG FL 33714	City-State-Zip:	ST. PETERSBURG FL 33709
	Title	CEO, DIRECTOR		
	Name	SCOTT, JESSICA L		
	Address	1601 DELAWARE AVENUE, N.E.		
	City-State-Zip:	ST. PETERSBURG FL 33703		

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.

> CEO, EXECUTIVE DIRECTOR

SIGNATURE: JESSICA L SCOTT

Electronic Signature of Signing Officer/Director Detail

Certificate of Status Desired: No

Date

04/29/2016 Date