

2005 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# 728992

FILED
Oct 18, 2005
Secretary of State

Entity Name: ALCOHOLIC REHAB, INC.

Current Principal Place of Business:

2625 MARKET ST
JACKSONVILLE, FL 32206 US

New Principal Place of Business:

Current Mailing Address:

2625 MARKET ST
JACKSONVILLE, FL 32206 US

New Mailing Address:

FEI Number: 23-7410323

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

EGAN, JAMES J.
9951 ATLANTIC BLVD.
STE 404
JACKSONVILLE, FL 32225 US

Name and Address of New Registered Agent:

WILSON, EILEEN H
6016 BLANK DRIVE
JACKSONVILLE, FL 32244 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: EILEEN H. WILSON

10/18/2005

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: LUCAS, JOHN M
Address: 2625 N MARKET ST
City-St-Zip: JACKSONVILLE, FL 32206

Title: VD () Delete
Name: NEFF, GEORGE
Address: 5227 ROLLINS AVE
City-St-Zip: JACKSONVILLE, FL 32207

Title: VD () Delete
Name: HOTHAM, RICHARD E
Address: 9441 BEAUCLERC COVE RD
City-St-Zip: JACKSONVILLE, FL 32257

Title: TD () Delete
Name: SANDERS, TOMMY
Address: 85498 LANA RD
City-St-Zip: YULEE, FL

Title: ST () Delete
Name: HARRIS, TRAUTE
Address: 85498 LANA RD
City-St-Zip: YULEE, FL 32097

Title: T () Delete
Name: BEIERSDORF, PETER
Address: 2625 N MARKET ST
City-St-Zip: JACKSONVILLE, FL 32206

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P/M (X) Change () Addition
Name: WILSON, EILEEN H
Address: 6016 BLANK DRIVE
City-St-Zip: JACKSONVILLE, FL 32244

Title: VD (X) Change () Addition
Name: NEFF, GEORGE
Address: 2214 STAUFFER RD.
City-St-Zip: GREEN COVE SPRINGS, FL 32043

Title: SD (X) Change () Addition
Name: HOTHAM, RICHARD E
Address: 9441 BEAUCLERC COVE RD
City-St-Zip: JACKSONVILLE, FL 32257

Title: VD (X) Change () Addition
Name: WELSH, BILL
Address: 2543 HIDDEN VILLAGE
City-St-Zip: JACKSONVILLE, FL 32254

Title: TD (X) Change () Addition
Name: ZUERCHER, JAMES
Address: 9009 WESTERN LAKE, #1303
City-St-Zip: JACKSONVILLE, FL 32256

Title: D (X) Change () Addition
Name: LUCAS, JOHN
Address: 4410 PIRATES COVE RD>
City-St-Zip: JACKSONVILLE, FL 32210

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: EILEEN H. WILSON

PD/M

10/18/2005

Electronic Signature of Signing Officer or Director

Date