

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 728992

FILED  
Jul 11, 2006  
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 ( )  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

## Name and Address of Current Registered Agent:

## 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:

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

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

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

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

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

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

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

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: VD (X) Change ( ) Addition  
Name: LUCAS, JOHN  
Address: 5219 SUNDERLAND RD.  
City-St-Zip: JACKSONVILLE, FL 32210

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: VD (X) Change ( ) Addition  
Name: REEVES, ROBERT  
Address: 555 BIRD ROAD  
City-St-Zip: JACKSONVILLE, FL 32218

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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

P/M

07/11/2006

Electronic Signature of Signing Officer or Director

Date