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Feb 18 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT
1997

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 737117 (2)

1. Corporation Name

TRI-COUNTY ADDICTIONS REHABILITATION SERVICES, I NC.

Principal Place of Business	Mailing Address
37 THIRD ST. SW PO BOX 9306 WINTER HAVEN FL 33883-6306	37 THIRD ST. SW PO BOX 9306 WINTER HAVEN FL 33883-9306

3. Date Incorporated or Qualified: 10/22/1976
3a. Date of Last Report: 04/01/1996

2. Principal Place of Business — 21
2a. Mailing Address — 26
Suite, Apt. #, etc. — 22 / 27
City & State — 23 / 28
Zip — 24 / Country — 25 / Zip — 29 / Country — 30

4. FEI Number: 59-1708182 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

TOMLINSON, VIDA
412 W. ORANGE ST
WAUCHULA FL 33873

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City **FL** 85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE Vida G. Tomlinson 2/12/97
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	D	☐ DELETE	1.1 TITLE	Secretary	☐ Change ☒ Addition
NAME	LAWRENCE, AMY		1.2 NAME	W. D. Wilcox	
STREET ADDRESS	P. O. BOX 1414 N/A		1.3 STREET ADDRESS	948 Heron Court	
CITY-ST-ZIP	AVON PARK FL		1.4 CITY-ST-ZIP	Winter Haven, Fl. 33884	
TITLE	D	☐ DELETE	2.1 TITLE		☐ Change ☐ Addition
NAME	ALUMBAUGH, LARRY		2.2 NAME		
STREET ADDRESS	2102 CREEK BEND DR.		2.3 STREET ADDRESS		
CITY-ST-ZIP	LAKELAND FL		2.4 CITY-ST-ZIP		
TITLE	T	☐ DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME	KOON, WILEY DR		3.2 NAME		
STREET ADDRESS	635 FIRST ST. N.		3.3 STREET ADDRESS		
CITY-ST-ZIP	WINTER HAVEN FL 33881		3.4 CITY-ST-ZIP		
TITLE	D	☐ DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME	EVERS, JOEL		4.2 NAME		
STREET ADDRESS	810 W PALMETTO ST		4.3 STREET ADDRESS		
CITY-ST-ZIP	WAUCHULA FL		4.4 CITY-ST-ZIP		
TITLE	C	☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME	TOMLINSON, VIDA		5.2 NAME		
STREET ADDRESS	412 W. ORANGE SR.		5.3 STREET ADDRESS		
CITY-ST-ZIP	WAUCHULA FL 33873		5.4 CITY-ST-ZIP		
TITLE	VC	☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME	SPANGERS, BENNIE		6.2 NAME		
STREET ADDRESS	2100 CRUMP ROAD		6.3 STREET ADDRESS		
CITY-ST-ZIP	WINTER HAVEN FL		6.4 CITY-ST-ZIP		

CR2E037 (9/96)

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Vida G. Tomlinson 2/12/97 941 299-4464
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

Paul B. Cate	441 E. Central Ave.	Winter Haven, Fl. 33880
Com. James Gose	2911 N. E. Lake Vier	Sebring, Fl. 33870
Diana Myrick	Mark Wilcox Center 611 Post Ave. S. W.	Winter Haven, Fl. 33880
Dr. David Neal	400 Ave. K, S. E.	Winter Haven, Fl. 33880
Walter Olliff, Jr.	412 W. Orange St., Room A204	Wauchula, Fl. 33873