

2012 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
Jun 15, 2012
Secretary of State

DOCUMENT# 762783

Entity Name: CHEMICAL DEPENDENCY COUNSELING INCORPORATED**Current Principal Place of Business:**300 WEST ADAMS STREET
SUITE #240
JACKSONVILLE, FL 32202 US**New Principal Place of Business:****Current Mailing Address:**300 WEST ADAMS STREET
SUITE #240
JACKSONVILLE, FL 32202 US**New Mailing Address:****FEI Number:** 59-2178947**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**FINNEY, CRAIG D
300 WEST ADAMS STREET
JACKSONVILLE, FL 32202 US**Name and Address of New Registered Agent:**

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: PRES
Name: HOBBS, KATHY
Address: 300 WEST ADAMS ST. SUITE 240
City-St-Zip: JACKSONVILLE, FL 32202 US

Title: VP
Name: FINNEY, CRAIG
Address: 300 WEST ADAMS ST. SUITE 240
City-St-Zip: JACKSONVILLE, FL 32202 US

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: KATHY HOBBS

PRES

06/15/2012

Electronic Signature of Signing Officer or Director

Date