2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F02000002909

Entity Name: SPENCER RECOVERY CENTERS, INC

Apr 06, 2011 Secretary of State

| Current Principal Place of Business: | New Principal Place of Business: |
|--------------------------------------|------------------------------------|
| Cullent Finicipal Flace Of Business. | New Fillicipal Flace Of Dusiliess. |

1316 S COAST HWY LAGUNA BEACH, CA 92651

Current Mailing Address: New Mailing Address:

PO. BOX 9296 PO. BOX 118

MONROVIA, CA 91017 LAGUNA BEACH, CA 92652

FEI Number: 95-4107286 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

SPENCER, CHRIS 140 COREY AVE

ST. PETE BEACH, FL 33706 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:

SPENCER, CHRIS Name: 1316 S COAST HWY Address: City-St-Zip: LAGUNA BEACH, CA 92651

Title: **VPT**

NICHOLS, CYNTHIA Name: Address: 1316 S COAST HWY LAGUNA BEACH, CA 92651 City-St-Zip:

Title:

Name: SALO GARCIA, CINDY 4860 TOPAZ DR Address:

City-St-Zip: COLORADO SPGS, CO 80918

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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: CINDY SALO GARCIA S 04/06/2011