

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F97000005622

FILED
Apr 29, 2010
Secretary of State

Entity Name: FLORIDA ADDICTIONS TREATMENT ALUMNI/F.A.T.A., INC.

Current Principal Place of Business:

113 MCKEAN ST.
AUBURNDALE, FL 33823 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 1361
AUBURNDALE, FL 33823 US

New Mailing Address:

FEI Number: 59-3164260 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

FLENTKE, DONALD
113 MCKEAN ST.
AUBURNDALE, FL 33823 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: PSDC
Name: FLENTKE, DONALD L
Address: 113 MCKEAN ST.
City-St-Zip: AUBURNDALE, FL 33823 US

Title: D
Name: NEWTON, C.J.
Address: 4520 SULLIVAN RD.
City-St-Zip: LAKE WALES, FL 33859 US

Title: D
Name: DUPREE, M.W.
Address: 12 SANDY LANE
City-St-Zip: AUBURNDALE, FL 33823 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: DONALD. L FLENTKE

PSDC

04/29/2010

Electronic Signature of Signing Officer or Director

Date