

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



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

APPROVED
1995
MAY 10

95 MAY -1 AM 10:50

FLORIDA DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **G16844** (4)

1. Corporation Name

ADDICTION TREATMENT PROGRAMS, INC.

Principal Office Location

**9001 TAMiami TRl E
NAPLES FL 33962
US**

Minority Address

**209 NORTH BEAVER STREET
P.O. BOX 5047
YORK PA 17405**

DO NOT WRITE IN THESE SPACES

3. Date of Incorporation (Year/Month)	3a. Date of Last Report
12/28/1982	05/01/1994
4. FEI Number	Applied For Not Application
59-1399457	
5. Certificate of Status (Required)	\$8.75 Additional Fee Required
6. Certificate of Status (Optional) Tried and Failed	\$5.00 May Be Added to Fees
7. Does corporation have liability to certificate of status fee? (Yes/No)	
8. Does corporation have liability to certificate of status fee? (Yes/No)	

2. Principal Office Location	2a. Minority Address
21	26
22	27
23	28
24	29
25	30

9. Name and Address of Current Registered Agent

**BRUGGER,JOHN N.
FORSYTH, SWALM & BRUGGER, P.A.
SUITE 210 600 5TH AVENUE S.
NAPLES FL 33940**

10. Name and Address of New Registered Agent

81. Name	85. State
82. Street Address	FL
83. City	
84. Zip	

11. I, the undersigned, being a resident of the State of Florida, do hereby certify that the foregoing is a true and correct copy of the information required by the Department of State to be filed with the Secretary of State for the purpose of filing the report of the corporation for the year ending on the date of filing of this report.

DECLARATION

12. Name	13. Address
CCEO MCCORMACK,WEBSTER J. 209 N. BEAVER ST. YORK PA STVD MCCORMACK, D. J. 209 N. BEAVER ST. YORK PA VD WILSON,RAY A. 209 N. BEAVER ST. YORK PA VST BRICKER,RICHARD W. (AST) 209 N. BEAVER ST. YORK PA D REYNOLDS, ANN 209 N. BEAVER ST. YORK PA S BRUGGER,JOHN N. (ASST) 600 FIFTH AVE. S.,#210 NAPLES FL	

14. I, the undersigned, being a resident of the State of Florida, do hereby certify that the foregoing is a true and correct copy of the information required by the Department of State to be filed with the Secretary of State for the purpose of filing the report of the corporation for the year ending on the date of filing of this report.

SIGNATURE:

Richard W. Bricker
SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR OFFICER
Richard W Bricker

7/24/95

717-854 7857