2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 04, 2008 8:00 am
Secretary of State
03-04-2008 90011 036 ***150.00

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DOCUMENT # K22824

1. Entity Name
LA AMISTAD RESIDENTIAL TREATMENT CENTER, INC.

Principal Place of Business	Mailing Address
201 ALPINE DR 1200 SOUTH PINE ISLAND ROAD MAITLAND, FL 32751 US	367 S GULPH ROAD PO BOX 61558 KING OF PRUSSIA, PA 19406-0958 US

2. Principal Place of Business - No P.O. Box #		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

02132008 Chg-P CR2E034 (12/06)

4. FEI Number 58-1791069 — Applied For / Not Applicable

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

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
CT CORPORATION SYSTEM 1200 S. PINE ISLAND ROAD PLANTATION, FL 33324	Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent's signature required when reinstating) DATE

FILE NOW!!! FEE IS $150.00
After May 1, 2008 Fee will be $550.00

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

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE	PD ☐ Delete	TITLE	☐ Change ☐ Addition
NAME	MILLER, ALAN B.	NAME	
STREET ADDRESS	367 S GULPH RD	STREET ADDRESS	
CITY-ST-ZIP	KING OF PRUSSIA, PA	CITY-ST-ZIP	
TITLE	VTD ☐ Delete	TITLE	☐ Change ☐ Addition
NAME	FILTON, STEVE	NAME	
STREET ADDRESS	367 S GULPH RD	STREET ADDRESS	
CITY-ST-ZIP	KING OF PRUSSIA, PA	CITY-ST-ZIP	
TITLE	VD ☐ Delete	TITLE	☐ Change ☐ Addition
NAME	OSTEEN, DEBRA	NAME	
STREET ADDRESS	367 S. GULPH RD	STREET ADDRESS	
CITY-ST-ZIP	KING OF PRUSSIA, PA	CITY-ST-ZIP	
TITLE	S ☑ Delete	TITLE	Secretary ☐ Change ☑ Addition
NAME	GILBERT, BRUCE R.	NAME	George H. Brunner Jr.
STREET ADDRESS	367 S GULPH RD.	STREET ADDRESS	367. S. Gulph Road
CITY-ST-ZIP	KING OF PRUSSIA, PA	CITY-ST-ZIP	King of Prussia, PA 19406
TITLE	☐ Delete	TITLE	☐ Change ☐ Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	☐ Delete	TITLE	☐ Change ☐ Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: _____ 2/19/08 610-768-3300
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

George H. Brunner, Jr.