

2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K90981

FILED
Feb 17, 2010
Secretary of State

Entity Name: EXTENDED CARE TREATMENT, INC.

Current Principal Place of Business:

1928 NE 154 ST
NORTH MIAMI BEACH, FL 33162 US

New Principal Place of Business:

Current Mailing Address:

1928 NE 154 ST
NORTH MIAMI BEACH, FL 33162 US

New Mailing Address:

FEI Number: 65-0134943 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

MC GOWAN, ROSELYN
1928 NE 154TH STREET
NORTH MIAMI BEACH, FL 33162 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DP
Name: BARCHAN, LEE
Address: 1928 NE 154 ST
City-St-Zip: NMB, FL

Title: DV
Name: MCGOWAN, ROSELYN
Address: 1928 NE 154 ST
City-St-Zip: NMB, FL

Title: DS
Name: MCGOWAN, ROSELYN
Address: 1928 NE 154 ST
City-St-Zip: NMB, FL

Title: DT
Name: BARCHAN, MARGARET
Address: 1928 NE 154 ST
City-St-Zip: NORTH MIAMI BEACH, FL 33162

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: ROSELYN MCGOWAN

DV

02/17/2010

_____ Electronic Signature of Signing Officer or Director

_____ Date