

2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000112568

FILED
May 01, 2011
Secretary of State

Entity Name: DAVIE RECOVERY CENTER LLC

Current Principal Place of Business:

5540 SW 64TH AVENUE
DAVIE, FL 33314 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 290430
DAVIE, FL 33329 US

New Mailing Address:

FEI Number: 20-5977202

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

PHIAMBOLIS, MARGARET
1080 SE 3RD AVENUE
FORT LAUDERDALE, FL 33316 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

MANAGING MEMBERS/MANAGERS:

Title: MGRM
Name: LIVORSI, TERRENCE B
Address: 2149 OAKDALE AVENUE
City-St-Zip: GLENSIDE, PA 19038 US

I hereby certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: TERRENCE LIVORSI

MGRM

05/01/2011

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date