

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L07000086981

**FILED**  
**Apr 25, 2012**  
**Secretary of State**

**Entity Name:** ADDICTION TREATMENT CENTERS OF AMERICA, L.L.C.

**Current Principal Place of Business:**

32815 US HIGHWAY 19 N.  
PALM HARBOR, FL 34684

**New Principal Place of Business:**

**Current Mailing Address:**

32815 US HIGHWAY 19 N.  
PALM HARBOR, FL 34684

**New Mailing Address:**

**FEI Number:** 26-1139089

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

GASSMAN, ALAN S  
1245 COURT STREET  
SUITE 102  
CLEARWATER, FL 33756 US

**Name and Address of New Registered Agent:**

BATES, LONDON L  
602 SKINNER BOULEVARD  
DUNEDIN, FL 34698 US

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: LONDON L. BATES

04/25/2012

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: SPONAUGLE, MARVIN L  
Address: 32815 US HIGHWAY 19 N.  
City-St-Zip: PALM HARBOR, FL 34684

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: MARVIN L. SPONAUGLE

MGR

04/25/2012

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