

2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L10000076374

FILED
Feb 18, 2011
Secretary of State

Entity Name: CTS ADDICTION & COUNSELING SERVICES, LLC

Current Principal Place of Business:

2215 RIO DE JANEIRO AVE
PUNTA GORDA, FL 33983

New Principal Place of Business:

Current Mailing Address:

2215 RIO DE JANEIRO AVE
PUNTA GORDA, FL 33983

New Mailing Address:

FEI Number: 27-3080223

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WILCOX, KIMBERLY
2215 RIO DE JANEIRO AVE
PUNTA GORDA, FL 33983 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: WILCOX, KIMBERLY
Address: 2215 RIO DE JANEIRO AVE
City-St-Zip: PUNTA GORDA, FL 33983

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: KIMBERLY WILCOX

MGRM

02/18/2011

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