

L 78429

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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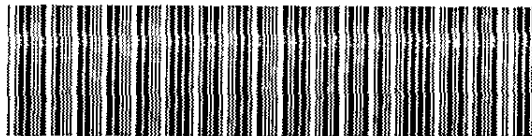
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

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8241 South U.S. 1  
Port St. Lucie, Florida 34952  
(772) 878-9368  
Fax: (772) 878-9378  
www.RecoveryAssociates.com

To: Amendment Section  
Division of Cooperation's

Date: 7/28/06  
Doc #: L78429  
From: Gordon Bohl, President of Recovery Associates, Inc

Please note the attach resignation of Gordon Bohl, of president of Recovery Associates, Inc. and Roland Verfaillie as a board member.

Irene Linton has been appointed president.

Elizabeth Bennett has been appointed sectary/treasurer

Gordon Bohl, L.C.S.W., C.A.P.  
President

Roland Verfaillie, L.M.H.T., N.C.C.  
Executive Director

Outpatient, Alcohol  
& Drug Treatment

Interventions, Consultation  
Codependency, After Care

Individual, Family,  
Group

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Recovery Associates Inc  
(Name of Corporation)

**DOCUMENT NUMBER:** L78429

The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Gordon Bohl  
(Name of Person)

Recovery Associates, Inc  
(Name of Firm/Company)

8241 S US Hwy  
(Address)

Port St. Lucie, FL 34957  
(City/State and Zip Code)

For further information concerning this matter, please call:

Gordon Bohl at (772) 878-9368  
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for \$35.00 made payable to the Florida Department of State.

**Street Address:**  
Amendment Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

**Mailing Address:**  
Amendment Section  
Division of Corporations  
Post Office Box 6327  
Tallahassee, FL 32314

**OFFICER / DIRECTOR RESIGNATION  
FOR A CORPORATION**

I, Gerona Bolt, hereby resign as President  
(Title)

of Recovery Associates, Inc.  
(Name of Corporation)

678429, a corporation organized under the laws of the State of  
(Document Number, if known)

Florida.

Gerona Bolt  
(Signature of resigning officer/director)

**FILED**  
06 AUG -3 AM 8:43  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**FILING FEE IS \$35.00**

**Make checks payable to Florida Department of State and mail to:**

Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314