

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000008434

FILED
Jan 17, 2008
Secretary of State

Entity Name: ALCOHOPE OF THE TREASURE COAST, INC.

Current Principal Place of Business:

3395 11TH CT
VERO BEACH, FL 32960

New Principal Place of Business:

Current Mailing Address:

3395 11TH CT
VERO BEACH, FL 32960

New Mailing Address:

FEI Number: 65-1156863

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HANLON, WILLIAM R
3395 11 TH CT
VERO BEACH, FL 32960 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

OFFICERS AND DIRECTORS:

Title: CEO () Delete
Name: HANLON, WILLIAM R
Address: 3395 11 TH CT
City-St-Zip: VERO BEACH, FL 32960

Title: CD () Delete
Name: HAMNER, GEORGE SR
Address: 650 HIGHWAY A1A
City-St-Zip: VERO BEACH, FL 32963

Title: VCD () Delete
Name: HANLEY, JACK
Address: 600 ST. ANNE'S LANE
City-St-Zip: VERO BEACH, FL 32963

Title: SD () Delete
Name: BANKS, JOHN
Address: 1601 20 TH ST.
City-St-Zip: VERO BEACH, FL 32965

Title: TD () Delete
Name: GOLDIE, ALAN
Address: 501 SHORES DRIVE
City-St-Zip: INDIAN RIVER SHORES, FL 32963

Title: D () Delete
Name: KOMARINETZ, SUE
Address: 3708 58TH CIRCLE
City-St-Zip: VERO BEACH, FL 32966

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
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Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: WILLIAM R HANLON

CEO

01/17/2008

Electronic Signature of Signing Officer or Director

Date