

**2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N01000001057

**FILED**  
**May 28, 2004**  
**Secretary of State****Entity Name:** NATIONAL COUNCIL ON ALCOHOLISM AND DRUG DEPENDENCE TAMPA, INC.**Current Principal Place of Business:**2701 W. BUSCH BOULEVARD  
206  
TAMPA, FL 33618**New Principal Place of Business:****Current Mailing Address:**2701 W. BUSCH BOULEVARD  
206  
TAMPA, FL 33618**New Mailing Address:****FEI Number:** 59-3705335      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )****Name and Address of Current Registered Agent:**STRAWBERRY, CHARISSE A  
5118 RUE VENDOME  
LUTZ, FL 33549**Name and Address of New Registered Agent:**STRAWBERRY, CHARISSE A  
4110 HIGHLAND PARK CIRCLE  
LUTZ, FL 33549

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: \_\_\_\_\_

05/28/2004

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: FORNACI, ADELE SMITHERS  
Address: 703 GUI SANDO DE AVILLA  
City-St-Zip: TAMPA, FL 33613

Title: D ( ) Delete  
Name: BYCZEK, JOHN A  
Address: 14608 DARTMOOR LANE  
City-St-Zip: TAMPA, FL 33624

Title: D ( ) Delete  
Name: NEDERLANDER, DAWN  
Address: 5 JENNIFER CT.  
City-St-Zip: RANCHO MIRAGE, CA

Title: D ( ) Delete  
Name: NEDERLANDER, SCOTT  
Address: 5 JENNIFER CT.  
City-St-Zip: RANCHO MIRAGE, CA

Title: D ( ) Delete  
Name: SUAREZ, JEFFREY  
Address: 12718 CASEY ROAD  
City-St-Zip: TAMPA, FL 33624

Title: D ( ) Delete  
Name: HELDFOND, BENJAMIN  
Address: 15438 NORTH FLORIDA AVE #200  
City-St-Zip: TAMPA, FL 33613

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: D (X) Change ( ) Addition  
Name: FORNACI, ADELE SMITHERS  
Address: 703 GUI SANDO DE AVILA  
City-St-Zip: TAMPA, FL 33613

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

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

Title: D (X) Change ( ) Addition  
Name: SIERRA SMITH, DINA  
Address: 1125 FLORES DE AVILA  
City-St-Zip: TAMPA, FL 33616

Title: D (X) Change ( ) Addition  
Name: AVIS, HARRISON  
Address: 18115 SUGAR BROOKE DRIVE  
City-St-Zip: TAMPA, FL 33635

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

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: ADELE SMITHERS FORNACI

D

05/28/2004

Electronic Signature of Signing Officer or Director

Date