

**2007 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT****FILED**  
**May 01, 2007**  
**Secretary of State**

DOCUMENT# N02000002893

**Entity Name:** INTERNATIONAL BROTHERHOOD IN RECOVERY, INC.**Current Principal Place of Business:**7981 NW 37TH DRIVE  
C/O PAUL JOSEPH MILLER  
CORAL SPRINGS, FL 33063 US**New Principal Place of Business:**7760 B NW 44TH STREET,STE 168  
C/O PAUL JOSEPH MILLER  
SUNRISE, FL 33351 US**Current Mailing Address:**7981 NW 37TH DRIVE  
C/O PAUL JOSEPH MILLER  
CPRAL SPRINGS, FL 33063 US**New Mailing Address:**7760 B NW 44TH STREET,STE 168  
C/O PAUL JOSEPH MILLER  
SUNRISE, FL 33351 US**FEI Number:** 03-0404326**FEI Number Applied For ( )****FEI Number Not Applicable ( )****Certificate of Status Desired ( )****Name and Address of Current Registered Agent:**SACHS, JOSHUA M RA  
7680 UNIVERSAL BLVD  
SUITE 100  
ORLANDO, FL 32819 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: P ( ) Delete  
Name: MILLER, PAUL J  
Address: 7981 NW 37TH DRIVE  
City-St-Zip: CORAL SPRINGS, FL 33063

Title: ST ( ) Delete  
Name: NORLEY, LYNN  
Address: 215 SHORELINE DRIVE  
City-St-Zip: BERWYN, PA 19312

Title: D (X) Delete  
Name: STOCKALL, DON  
Address: 101 N. OCEAN DRIVE--STE. 593  
City-St-Zip: HOLLYWOOD BEACH, FL 33019

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

Title: P (X) Change ( ) Addition  
Name: MILLER, PAUL J  
Address: 7760 B NW 44TH STREET,STE 168  
City-St-Zip: SUNRISE, FL 33351

Title: ST (X) Change ( ) Addition  
Name: NORLEY, LYNN  
Address: 215 SHORELINE DRIVE  
City-St-Zip: BENWYN, PA 19312

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: PAUL JOSEPH MILLER

P

05/01/2007

Electronic Signature of Signing Officer or Director

Date