FILED Mar 17, 2003 8:00 am Secretary of State 03-17-2003 90690 046 ****61.25

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| DOCUN | MENT # N02000005 | 517 | | | | | | | |
| I. Entity Name RECOVER | Y CIRCLES FOUNDATION | , INC. | | | | | | | |
| Principal Place 26210 WOODL BONITA SPRIN | | Mailing Address 26210 WOODLYNN DRIV BONITA SPRINGS, FL 34 | | ,- | | | | | |
| 2. Principal Pla | ace of Business | 3. Mailing Address | | | | | | | |
| Suite, Apt. #, etc. | | Suite, Apt. #, etc. | | | CHECK HERE IF MAKING CHANGES | | | | |
| City & State | | City & State | City & State | | 4. FEI Number 32-0022237 Applied Fo | | | piled For Applicable | |
| Zip | Country | Zip | Countr | ry | 5. Certificate of Stat | us Desired | □ \$8 | .75 Add | itional |
| | 6. Name and Address of Curren | t Registered Agent | | Name | 7. Name and Addre | ss of New Re | gistered Age | nt | |
| 1200 SOUTI | RATION SYSTEM H PINE ISLAND ROAD | • | L. | | (P.O. Box Number Is No | ot Acceptable) |) | | |
| | N, FL 33324 | • | | | | | | | |
| 1,8, | ; | | | City | | | FL | Zip Code | , |
| the obligati | named entity submits this statement ons of registered agent. Signature, typed or primed name of registered agent. | | | office or registr | | | CATE | | |
| the obligati | ions of registered agent. | nt and little if appricable. (NO | TE, Registeret A | wentsignatura requir | \$5.00 May Be | Mal Florid | CATE Ke Check P Ia Departm | Payable ent of S | to), |
| the obligation of the obligati | ons of registered agent. Signature, hyperior primer name of registerior agent. FILE NOW TEETIS \$81.25%. | 9. Election Ca Trust Fund | TE. Register of A ampaign Fini Contribution | Agent signatura Abqui nancing n. | sul when divisiating) | Mal Florid | CATE KE Check'P III Departm | ayable entrot's | to). Complete on the state of t |
| the obligati | Ons of registered agent. Signatura, hyped or printed name of registered agent. FILES NOW IFFE IS: \$61.25*. OFFICERS AND I D FORD, KATHLEEN G 26210 WOODLYNN DRIVE | grand ide i pupicatée. (NO 9. Election Ca 7. Trust Fund | TE Registrat A Empaign Fint Contribution 11. 1/106 NAME | nancing n. DFO | \$5.00 May Be Added to Fees ADDITIONS/CHANGE RD, WILLIAM 420 AMARANT | Maj Frond S 10 OFFICER 1 SEAN TH ROAD | Check P B. Departm | Payable ent of S | to) |
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MORRISSEY & ROBINSON

ATTORNEYS AT LAW

ONE OAKBROOK TERRACE, SUITE 802
OAKBROOK TERRACE, ILLINOIS 60181
(630) 424-9300

FACSIMILE (630) 424-8890

> E-MAIL morrob@aol.com

* ALSO ADMITTED TO FLORIDA BAR

WALTER W. MORRISSEY *

JOSEPH M. ROBINSON

COLLEEN M. HEALY

March 10, 2003

Florida Department of State Division of Corporations Corporate Filings P.O. Box 6327 Tallahassee, Florida 32314

Re: Recovery Circles Foundation, Inc.

Dear Sir or Madam:

Enclosed for filing please find 2003 Not-For-Profit Corporation Uniform Business Report known as Document #N02000005517 and check #1606 in the amount of \$61.25. If you have any questions, please contact us.

Very truly yours,

MORRISSEY & ROBINSON

Colleen M. Healy

CMH:arl Enclosures

cc: Kathleen G. Ford

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