

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000009962

FILED
Apr 13, 2012
Secretary of State

Entity Name: METRO ORLANDO RECOVERY RESIDENCES, INC.

Current Principal Place of Business:

600 NORTH HWY 17-92
SUITE 122
LONGWOOD, FL 32750

New Principal Place of Business:

531 NORTH HWY 17-92
SUITE 6
LONGWOOD, FL 32750 UN

Current Mailing Address:

P. O. BOX 265073
DAYTONA BEACH, FL 32126

New Mailing Address:

FEI Number: 55-0814143

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KRAMER, MICHAEL
600 NORTH HWY 17-92
SUITE 122
LONGWOOD, FL 32750 US

Name and Address of New Registered Agent:

KRAMER, MICHAEL
531 NORTH HWY 17-92
SUITE 6
LONGWOOD, FL 32750 US

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:

04/13/2012

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PTD
Name: KRAMER, MICHAEL
Address: 531 NORTH HWY 17-92
City-St-Zip: LONGWOOD, FL 32750

Title: SD
Name: DOLAN, ROBERT
Address: 531 NORTH HWY 17-92
City-St-Zip: LONGWOOD, FL 32750

Title: D
Name: KRAMER, STEVEN
Address: 531 NORTH HWY 17-92
City-St-Zip: LONGWOOD, FL 32750

I hereby 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 all other like empowered.

SIGNATURE: MICHAEL A. KRAMER

PRES

04/13/2012

Electronic Signature of Signing Officer or Director

Date