

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000005608

FILED
Apr 30, 2008
Secretary of State

Entity Name: NORTH EAST FLORIDA ADDICTIONS NETWORK, INC.

Current Principal Place of Business:

1300 NORTH AMELIA AVENUE
DELAND, FL 32724

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 694
DELAND, FL 32721

New Mailing Address:

FEI Number: 30-0269888

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

HANKEY, RICK S
3481 FOXTON COURT
OVIEDO, FL 32765 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: PRES () Delete
Name: GREENOUGH, PATRICIA
Address: 1400 OLD DIXIE HIGHWAY
City-St-Zip: ST. AUGUSTINE, FL 32804 US

Title: VPRES () Delete
Name: BELL, CHET
Address: 3875 TIGER BAY ROAD
City-St-Zip: DAYTONA BEACH, FL 32124 US

Title: SEC () Delete
Name: POWERS, GARY
Address: 555 STOCKTON STREET
City-St-Zip: JACKSONVILLE, FL 32204 US

Title: TREA () Delete
Name: MILLER, JANET
Address: 1220 WILLIS AVENUE
City-St-Zip: DAYTONA BEACH, FL 32114 US

Title: MEMB () Delete
Name: NODEN, MALCOLM
Address: 2120 CALAIS LANE
City-St-Zip: FERNANDINA BEACH, FL 32034 US

Title: D () Delete
Name: WILLIAMS, DERYA
Address: 600 PARK STREET
City-St-Zip: JACKSONVILLE, FL 32204 US

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
Name:
Address:
City-St-Zip:

Title: MEMB (X) Change () Addition
Name: WILLIAMS, DERYA
Address: 2055 REYKO ROAD
City-St-Zip: JACKSONVILLE, FL 32034 US

Title: D (X) Change () Addition
Name: SALAZAR, RAYMOND
Address: 3747 W. INTERNATIONAL SPEEDWAY BLVD
City-St-Zip: DAYTONA BEACH, FL 32124 US

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: RICK S HANKEY

EXEC

04/30/2008

Electronic Signature of Signing Officer or Director

Date