

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000010136

FILED  
May 01, 2012  
Secretary of State

**Entity Name:** SOUTH FLORIDA EVALUATION TREATMENT CENTER FINANCING CORPORATION

**Current Principal Place of Business:**

ONE PARK PLACE, SUITE 700  
621 NW 53RD STREET  
BOCA RATON, FL 33487

**New Principal Place of Business:**

621 NW 53RD STREET, SUITE 700  
BOCA RATON, FL 33487

**Current Mailing Address:**

ONE PARK PLACE, SUITE 700  
621 NW 53RD STREET  
BOCA RATON, FL 33487

**New Mailing Address:**

621 NW 53RD STREET, SUITE 700  
BOCA RATON, FL 33487

**FEI Number:** 20-3555855

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

JOHNSON, GARY W ESQ.  
TRIPP SCOTT, P.A.  
110 SOUTHEAST 6TH STREET, 15TH FLOOR  
FORT LAUDERDALE, FL 33301 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: DP  
Name: FRICK, DALE W  
Address: ONE PARK PLACE, STE 700, 621 NW 53RD ST  
City-St-Zip: BOCA RATON, FL S3487

Title: DST  
Name: DOMINICIS, JORGE  
Address: ONE PARK PLACE, STE 700, 621 NW 53RD ST  
City-St-Zip: BOCA RATON, FL S3487

Title: DV  
Name: BULFIN, JOHN  
Address: ONE PARK PLACE, STE 700, 621 NW 53RD ST  
City-St-Zip: BOCA RATON, FL S3487

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: JOHN J BULFIN

DV

05/01/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date