2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000011596

Entity Name: PARTNERSHIP FOR RECOVERY, INC.

FILED Mar 23, 2009 Secretary of State

Current Principa	al Place of Business:	New Principal Place of Business:

RONALD L. BOOK, ESQ. HARBOUR CENTRE 18851 N.E. 29TH AVENUE

2999 NE 191ST ST - PH 6 SUITE 1010 AVENTURA, FL 33180

AVENTURA, FL 33180

Current Mailing Address: New Mailing Address:

RONALD L. BOOK, ESQ HARBOUR CENTRE 18851 N.E. 29TH AVENUE

2999 NE 191ST ST - PH 6 SUITE 1010

AVENTURA, FL 33180 AVENTURA, FL 33180

FEI Number: 20-3830683 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

BOOK, RONALD L ESQ BOOK, RONALD LESQ

2999 NE 191ST ST HARBOUR CENTRE 18851 N.E. 29TH AVENUE

PH 6 **SUITE 1010**

AVENTURA, FL 33180 US AVENTURA, FL 33180 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: 03/23/2009

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change () Addition () Delete

BOOK, RONALD L ESQ BOOK, RONALD L ESQ Name: Name:

Address: 2999 NE 191ST ST - PH 6 Address: HARBOUR CENTRE 18851 N.E. 29TH AVENUE SU

City-St-Zip: AVENTURA, FL 33180 City-St-Zip: AVENTURA, FL 33180

Title: () Delete Title: () Change () Addition

BURGESS, GEORGE Name: Name: Address: 111 NW FIRST ST - STE 2910 Address: City-St-Zip: MIAMI, FL 33128 City-St-Zip:

Title: () Delete Title: () Change () Addition

FOYO, GEORGE Name: Name: 1601 BISCAYNE BLVD Address: Address: City-St-Zip: MIAMI, FL 33132 City-St-Zip:

(X) Change () Addition Title: () Delete Title:

Name: BURTON, BENJAMIN J Name: BURTON, BENJAMIN J

2125 BISCAYNE BLVD., SUITE 200 3550 BISCAYNE BLVD., SUITE 610 Address: Address:

City-St-Zip: MIAMI, FL 33137 City-St-Zip: MIAMI, FL 33137

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: RONALD L. BOOK D 03/23/2009