

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000004031

FILED
Apr 22, 2008
Secretary of State

Entity Name: VETERANS DETOXIFICATION PROJECT, INC.

Current Principal Place of Business:

22073 US HWY 19 NORTH
CLEARWATER, FL 33765

New Principal Place of Business:

Current Mailing Address:

22073 US HWY 19 NORTH
CLEARWATER, FL 33765

New Mailing Address:

FEI Number: 20-4695163

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LORCH, DANIEL
22073 US HWY 19 NORTH
CLEARWATER, FL 33765 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: DCEO () Delete
Name: LORCH, DANIEL
Address: 311 JEFFERSON AVENUE N
City-St-Zip: CLEARWATER, FL 33755

Title: TS () Delete
Name: LORCH, DANIEL
Address: 311 JEFFERSON AVENUE N
City-St-Zip: CLEARWATER, FL 33755

Title: PD () Delete
Name: MILLER, BRETT
Address: 500 N OSCEOLA AVE, PH-G
City-St-Zip: CLEARWATER, FL 33755

Title: D () Delete
Name: LORCH, LINDA
Address: 311 JEFFERSON AVENUE N
City-St-Zip: CLEARWATER, FL 33755

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:

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: DANIEL LORCH

D

04/22/2008

Electronic Signature of Signing Officer or Director

Date