

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000002197

FILED
Apr 23, 2010
Secretary of State

Entity Name: DRUG ABUSE PREVENTION INC.

Current Principal Place of Business:

1517 SILVER RIDGE DRIVE
CANTONMENT, FL 32533

New Principal Place of Business:

Current Mailing Address:

1517 SILVER RIDGE DRIVE
CANTONMENT, FL 32533

New Mailing Address:

FEI Number: 59-3825015

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PROCTOR, DAISY
1517 SILVER RIDGE DRIVE
CANTONMENT, FL 32533 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: PROCTOR, DAISY
Address: 1517 SILVER RIDGE DRIVE
City-St-Zip: CANTONMENT, FL 32533

Title: DV
Name: PROCTOR, ROBERT JR
Address: 1517 SILVER RIDGE DRIVE
City-St-Zip: CANTONMENT, FL 32533

Title: D
Name: CALDWELL, LEROY J SR
Address: 16 MOHAWK TRL
City-St-Zip: PENSACOLA, FL 32506

Title: D
Name: THOMPSON, KAY
Address: 7914 DEBORAH DR APT B
City-St-Zip: PENSACOLA, FL 32514

Title: D
Name: PROCTOR, ARMETTER
Address: 8455 JARMEN ST
City-St-Zip: PENSACOLA, FL 32534

Title: D
Name: PROCTOR, VICTORIA
Address: 6106 DUNWOODY GABLES DR.
City-St-Zip: ATLANTA, GA 30338

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: DAISY PROCTOR

DP

04/23/2010

Electronic Signature of Signing Officer or Director

Date