

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000000245

FILED
Apr 30, 2010
Secretary of State

Entity Name: THE SOLUTION RECOVERY FOUNDATION, INC.

Current Principal Place of Business:

2303 HOLLYWOOD BLVD
SUITE 8
HOLLYWOOD, FL 33020

New Principal Place of Business:

2303 HOLLYWOOD BLVD
SUITE 13
HOLLYWOOD, FL 33020

Current Mailing Address:

2303 HOLLYWOOD BLVD
SUITE 8
HOLLYWOOD, FL 33020

New Mailing Address:

2303 HOLLYWOOD BLVD
SUITE 13
HOLLYWOOD, FL 33020

FEI Number:

FEI Number Applied For (X)

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PALERMO, SALVATORE
2303 HOLLYWOOD BLVD
8
HOLLYWOOD, FL 33020 US

Name and Address of New Registered Agent:

PALERMO, SALVATORE
2303 HOLLYWOOD BLVD
13
HOLLYWOOD, FL 33020 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: SALVATORE PALERMO

04/30/2010

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P
Name: PALERMO, SALVATORE
Address: 2303 HOLLYWOOD BLVD, SUITE 13
City-St-Zip: HOLLYWOOD, FL 33020

Title: D
Name: WILLIAMS, ROSEMARRIE
Address: 2303 HOLLYWOOD BLVD #13
City-St-Zip: HOLLYWOOD, FL 33020 US

Title: D
Name: POUEY, ANDREA
Address: 2303 HOLLYWOOD BLVD #13
City-St-Zip: HOLLYWOOD, FL 33020 US

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: SALVATORE PALERMO

P

04/30/2010

Electronic Signature of Signing Officer or Director

Date