

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N09000006334

FILED  
Mar 20, 2012  
Secretary of State

Entity Name: FRIENDS OF RECOVERY, INC.

## Current Principal Place of Business:

435 SE FLAGLER AVE  
STUART, FL 34994

## New Principal Place of Business:

## Current Mailing Address:

435 SE FLAGLER AVE  
STUART, FL 34994

## New Mailing Address:

435 S.E. FLAGLER AVENUE  
STUART, FL 34994

FEI Number: 27-0228009

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

COCOVES, ANITA  
435 SE FLAGLER AVE  
STUART, FL 34994 US

## Name and Address of New Registered Agent:

COCOVES, ANITA  
472 S.E. EDGEWOOD DRIVE  
STUART, FL 34996 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:

03/20/2012

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: P  
Name: COCOVES, ANITA  
Address: 435 SE FLAGLER AVE  
City-St-Zip: STUART, FL 34994

Title: VP  
Name: ROEBUCK, PAMELA  
Address: 435 SE FLAGLER AVE  
City-St-Zip: STUART, FL 34994

Title: TREA  
Name: ROEBUCK, PAMELA  
Address: 435 S.E. FLAGLER AVENUE  
City-St-Zip: STUART, FL 34994 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: ANITA COCOVES

PRES

03/20/2012

Electronic Signature of Signing Officer or Director

Date