

NO90000009939

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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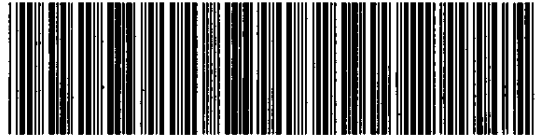
(Business Entity Name)

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*Principal  
address  
change  
APL  
12/2/09*

**Ramsey, Annette**

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**From:** Adrian Brion [Abrion@form-a-corp.com]  
**Sent:** Wednesday, December 02, 2009 10:57 AM  
**To:** Ramsey, Annette  
**Subject:** Sunrise Counseling and Rehabilitation Services Inc.

Corporate Name:  
Sunrise Counseling and Rehabilitation Services Inc.

Document Number:  
N09000009939

Please change the Principal Business Address to:

11216 219th Street  
Queens Village, NY 11429

Thank you for your assistance with this and Happy Holidays.

Sincerely,

Adrian Brion

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