

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N10000005113

FILED
Mar 22, 2011
Secretary of State

Entity Name: THE CENTER FOR VICTIM RECOVERY, INC.

Current Principal Place of Business:

811 LAKE COMO DRIVE
LAKE MARY, FL 32746

New Principal Place of Business:

Current Mailing Address:

PO BOX 951190
LAKE MARY, FL 327951190

New Mailing Address:

FEI Number: 27-2687586

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

YORK, LISA
811 LAKE COMO DRIVE
LAKE MARY, FL 32746 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: MR.
Name: HAROLD, HEDRICK
Address: 2528 WOODGATE BLVD
City-St-Zip: ORLANDO, FL 32822

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: LISA YORK

DIR

03/22/2011

Electronic Signature of Signing Officer or Director

Date