2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N10000006705

Entity Name: MAD OVER METHADONE, INC.

FILED Sep 19, 2011 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

3065 SOUTH FERNCREEK AVENUE 1321 ARBOR VISTA LOOP ORLANDO, FL 32806

#137

LAKE MARY, FL 32746

Current Mailing Address: New Mailing Address:

3065 SOUTH FERNCREEK AVENUE 1321 ARBOR VISTA LOOP ORLANDO, FL 32806

#137

LAKE MARY, FL 32746 US

FEI Number: 27-3072212 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

LEVINE, DONNA L BRIAN M. WALSH, ESQ., P.A. 3065 SOUTH FERNCREEK AVENUE 3117 EDGEWATER DRIVE ORLANDO, FL 32806 ORLANDO, FL 32804

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: BRIAN M. WALSH, ESQ. PRESIDENT 09/19/2011

> Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

CEO

LEVINE, DONNA L Name:

Address: 1321 ARBOR VISTA LOOP #137 City-St-Zip: LAKE MARY, FL 32746 US

Title:

Name: TOBEY, GLEN

Address: 1321 ARBOR VISTA LOOP #137 City-St-Zip: LAKE MARY, FL 32746 US

Title: VΡ

RICHARDS, JUILO Name:

1321 ARBOR VISTA LOOP #137 Address: City-St-Zip: LAKE MARY, FL 32746 US

Title:

Name: CLARK, CAROL

1321 ARBOR VISTA LOOP #137 Address: City-St-Zip: LAKE MARY, FL 32746 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: DONNA L. LEVINE CEO 09/19/2011