

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N11000009177

FILED
Apr 23, 2012
Secretary of State

Entity Name: FLORIDA ASSOCIATION OF RECOVERY RESIDENCES, INC.

Current Principal Place of Business:

2201 NW 30TH PLACE
SUITE A
POMPANO BEACH, FL 33069

New Principal Place of Business:

Current Mailing Address:

2201 NW 30TH PLACE
SUITE A
POMPANO BEACH, FL 33069

New Mailing Address:

FEI Number: **FEI Number Applied For (X)** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

STEINER, JEFFREY S
2201 NW 30TH PLACE
SUITE A
POMPANO BEACH, FL 33069 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: D
Name: STEINER, NANCY
Address: 1555 ESTUARY TRAIL
City-St-Zip: DELRAY BEACH, FL 33483

Title: D
Name: STEINER, JEFFREY S
Address: 1555 ESTUARY TRAIL
City-St-Zip: DELRAY BEACH, FL 33483

Title: D
Name: KELLEY, LAURA
Address: P.O. BOX 8463
City-St-Zip: DELRAY BEACH, FL 33482

Title: P
Name: STEINER, NANCY
Address: 1555 ESTUARY TRAIL
City-St-Zip: DELRAY BEACH, FL 33483

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: JEFFREY S STEINER

DIR

04/23/2012

Electronic Signature of Signing Officer or Director

Date