

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N40689

FILED  
Jun 18, 2012  
Secretary of State

**Entity Name:** NEWLIFE ADDICTIONS PROGRAM, INC.

**Current Principal Place of Business:**

2650 MOSELEY ROAD  
ORANGE PARK, FL 32065 US

**New Principal Place of Business:**

10980 106 WAY NORTH  
LARGO, FL 33773 US

**Current Mailing Address:**

P.O. BOX 65321  
ORANGE PARK, FL 32065 US

**New Mailing Address:**

10980 106 WAY NORTH  
LARGO, FL 33773 US

**FEI Number:** 59-3041351

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MCPHILAMY, WILLIAM P  
2650 MOSELEY ROAD  
ORANGE PARK, FL 32065 US

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

MCPHILAMY, WILLIAM P  
10980 106 WAY NORTH  
LARGO, FL 33773 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: WILLIAM P. MCPHILAMY

06/18/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: EDCB  
Name: MCPHILAMY, WILLIAM P  
Address: 10980 106 WAY NORTH  
City-St-Zip: LARGO, FL 33773

Title: OD  
Name: RIVERA-KOLD, KENNETH  
Address: 10980 106 WAY NORTH  
City-St-Zip: LARGO, FL 33773

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: WILLIAM MCPHILAMY

EDCB

06/18/2012

Electronic Signature of Signing Officer or Director

Date