

# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N46471

FILED  
Jun 21, 2005  
Secretary of State

**Entity Name:** FLORIDA SCHOOL OF ADDICTIONS STUDIES, ALUMNI ASSOCIATION, INC.

**Current Principal Place of Business:**

5701 89TH AVE NORTH  
PINELLAS PARK, FL 33782

**New Principal Place of Business:**

22079 US HWY 19 NORTH  
CLEARWATER, FL 33765

**Current Mailing Address:**

5701 89TH AVE NORTH  
PINELLAS PARK, FL 33782

**New Mailing Address:**

22079 US HWY NORTH  
CLEARWATER, FL 33765

**FEI Number:** **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired (X)**  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

COOK, MATTHEW E  
5701 89TH AVENUE NORTH  
PINELLAS PARK, FL 33782 US

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

BRYANT, CRAIG L  
4304 FINCASTLE COURT  
TAMPA, FL 33624 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: CRAIG L. BRYANT

06/21/2005

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: TD ( ) Delete  
Name: DOYLE-JONES, ANNE  
Address: 8940 90TH TERRACE N.  
City-St-Zip: LARGO, FL 33777

Title: VD ( ) Delete  
Name: DEMING, MEREDITH  
Address: 304 S. HABANA AVENUE  
City-St-Zip: TAMPA, FL 33609

Title: PD ( ) Delete  
Name: COOK, MATTHEW E  
Address: 7016 52ND WAY  
City-St-Zip: PINELLAS PARK, FL 33782

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P (X) Change ( ) Addition  
Name: ALDERMAN, CHERYL  
Address: 22079 US HWY 19 NORTH  
City-St-Zip: CLEARWATER, FL 33765

Title: VP (X) Change ( ) Addition  
Name: DEMING, MEREDITH  
Address: 304 S. HABANA AVENUE  
City-St-Zip: TAMPA, FL 33609

Title: T (X) Change ( ) Addition  
Name: BRYANT, CRAIG L  
Address: 4304 FINCASTLE COURT  
City-St-Zip: TAMPA, FL 33624

Title: S ( ) Change (X) Addition  
Name: CASTIGLIA, RAYMOND  
Address: 6620 41ST STREET NORTH  
City-St-Zip: PINELLAS PARK, FL 33781

Title: E ( ) Change (X) Addition  
Name: COOPER, SARAH  
Address: 1551 TURNER STREET  
City-St-Zip: CLEARWATER, FL 33756

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: CRAIG L. BRYANT

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06/21/2005

Electronic Signature of Signing Officer or Director

Date