2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 09, 2007
Secretary of State

DOCUMENT# N50633

Entity Name: TEENS AGAINST DRUGS AND ALCOHOL, INC.

Current Principal Place of Business:

3208-C E. COLONIAL DR.
STE. 349
ORLANDO, FL 32803 US

New Principal Place of Business:

Current Mailing Address:

3208-C E. COLONIAL DR.
STE. 349
ORLANDO, FL 32803 US

New Mailing Address:

FEI Number: 59-3173802 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

GASPERONI, EMIL A., JR.
SUITE 800
505 WEKIVA SPRINGS ROAD
LONGWOOD, FL 32779 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: MD ( ) Delete
Name: FLINT, MARGARET
Address: 8773 FOLEY DR
City-St-Zip: ORLANDO, FL 32825

Title: D (X) Delete
Name: KLUGH, KEN
Address: 810 WHITTINGHAM CT
City-St-Zip: LAKE MARY, FL 32746

Title: D ( ) Delete
Name: LAPOINTE, DANIEL
Address: 710 E CENTRAL BLVD
City-St-Zip: ORLANDO, FL 32801

Title: D (X) Delete
Name: PAPAGEORGIO, GEORGE
Address: 1327 BENNETT DR.
City-St-Zip: LONGWOOD, FL 32750

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: MD (X) Change ( ) Addition
Name: PAPAGEORGIOU, GEORGE
Address: 4894 CASON COVE DR.
City-St-Zip: ORLANDO, FL 32825

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: GEORGE PAPAGEORGIOU MD 01/09/2007

Electronic Signature of Signing Officer or Director — Date