

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000052094

FILED
Apr 25, 2006
Secretary of State

Entity Name: INSTITUTE FOR ADDICTION STUDIES, INC.

Current Principal Place of Business:

817 N E 19TH AVENUE
FORT LAUDERDALE, FL 33304

New Principal Place of Business:

1140 WOODCREST AVENUE
INVERNESS, FL 34453

Current Mailing Address:

817 N E 19TH AVENUE
FORT LAUDERDALE, FL 33304

New Mailing Address:

1140 WOODCREST AVENUE
INVERNESS, FL 34453

FEI Number: 65-1104137

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

STENDER, WILLIAM
817 N E 19TH AVENUE
FORT LAUDERDALE, FL 33304 US

Name and Address of New Registered Agent:

STENDER, WILLIAM
1140 WOODCREST AVENUE
INVERNESS, FL 34453 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:

04/25/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PSD () Delete
Name: STENDER, WILLIAM
Address: 817 N E 19TH AVENUE
City-St-Zip: FORT LAUDERDALE, FL 33304

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSD (X) Change () Addition
Name: STENDER, WILLIAM
Address: 1140 WOODCREST AVENUE
City-St-Zip: INVERNESS, FL 34453

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: WILLIAM R.STENDER

PRES

04/25/2006

Electronic Signature of Signing Officer or Director

Date