

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000045587

FILED
Jan 07, 2012
Secretary of State

Entity Name: COMPREHENSIVE OUTPATIENT RECOVERY, TREATMENT & EVALUATION, INC.

Current Principal Place of Business:

1300 N.W. 17TH AVENUE
SUITE 101
DELRAY BEACH, FL 33445

New Principal Place of Business:

Current Mailing Address:

1300 N.W. 17TH AVENUE
SUITE 101
DELRAY BEACH, FL 33445

New Mailing Address:

FEI Number: 74-3041421

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SHEEHAN, DAWN N
1300 N.W. 17TH AVENUE
SUITE 101
DELRAY BEACH, FL 33445 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: P
Name: SHEEHAN, DAWN N
Address: 1300 N.W. 17TH AVENUE, SUITE 101
City-St-Zip: DELRAY BEACH, FL 33445

Title: CEO
Name: COSTANZA, SCOTT M
Address: 1300 N.W. 17TH AVENUE, SUITE 101
City-St-Zip: DELRAY BEACH, FL 33445

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

SIGNATURE: SCOTT M. COSTANZA

CEO

01/07/2012

Electronic Signature of Signing Officer or Director

Date