

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P02000097870

**FILED**  
**Apr 19, 2012**  
**Secretary of State**

**Entity Name:** ADDICTION RECOVERY & COUNSELING CORPORATION

**Current Principal Place of Business:**

655 NORTH MILITARY TR., SUITE 3  
WEST PALM BEACH, FL 33415

**New Principal Place of Business:**

**Current Mailing Address:**

655 NORTH MILITARY TR., SUITE 3  
WEST PALM BEACH, FL 33415

**New Mailing Address:**

**FEI Number:** 16-1626918

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

CORBIN, RONALD J  
1509 N. MILITARY TRAIL  
SUITE 100  
WEST PALM BEACH, FL 33409 US

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

CORBIN, RONALD J  
655 N. MILITARY TRAIL  
SUITE 3  
WEST PALM BEACH, FL 33415 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: RONALD CORBIN

04/19/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: CEO  
Name: CORBIN, RONALD J  
Address: 655 N. MILITARY TRAIL  
City-St-Zip: WEST PALM BEACH, FL 33415

Title: D  
Name: CORBIN, ROGER  
Address: 18612 LORAS COURT  
City-St-Zip: COUNTRY CLUB HILLS, IL 60478

Title: D  
Name: FARRELL, ELAINE  
Address: 11300 N.W. 39TH STREET  
City-St-Zip: CORAL SPRINGS, FL 33435

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: RONALD CORBIN

CEO

04/19/2012

Electronic Signature of Signing Officer or Director

Date