

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P10000026772

FILED
Apr 17, 2012
Secretary of State

Entity Name: THE FIFTH RIVER MENTAL HEALTH INC

Current Principal Place of Business:

55 NE 5TH AVENUE
501
BOCA RATON, FL 33432

New Principal Place of Business:

Current Mailing Address:

55 NE 5TH AVENUE
501
BOCA RATON, FL 33432

New Mailing Address:

FEI Number: 27-2203395

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MONIQUE TRONCONE CPA PA
55 NE 5TH AVENUE
501
BOCA RATON, FL 33432 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: KNEBL KOHL, GISELA E
Address: 1112 OAKENCROFT CT
City-St-Zip: LEWISVILLE, NC 27023

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: GISELA KNEBL

P

04/17/2012

Electronic Signature of Signing Officer or Director

Date