

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P98000025424

1. Entity Name

RECOVERY RESIDENCES, INC.

FILED
Apr 27, 2000 8:00 am
Secretary of State

04-27-2000 90105 037 ***150.00

Principal Place of Business

Mailing Address

9112 ALTERNATE A1A, SUITE 103
LAKE PARK FL 33403

9112 ALTERNATE A1A, SUITE 103
LAKE PARK FL 33403-1451

2. Principal Place of Business

450 Northlake Blvd

3. Mailing Address

450 Northlake Blvd.

Suite, Apt. #, etc.

11

Suite, Apt. #, etc.

11

City & State

Lake Park, FL

City & State

Lake Park, FL

Zip

33403

Country

USA

Zip

33403

Country

USA

4. FEI Number

65-0862343

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

SCHRADER, WILLIAM E
9112 ALTERNATE A1A, SUITE 103
LAKE PARK FL 33403

Name

Street Address (P.O. Box Number is Not Acceptable)

450 Northlake Blvd. # 11

City

Lake Park

FL

Zip Code

33408

8. 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

William Schrader

4-19-2000

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back)

FILE NOW!!! FEE IS \$150.00

After MAY 1, 2000 Fee will be \$550.00

Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE DTS ☐ Delete
NAME SCHRADER, WILLIAM
STREET ADDRESS 9112 ALT-A1A, SUITE #103
CITY-ST-ZIP LAKE PARK FL 33403

TITLE ☒ Change ☐ Addition
NAME 450 Northlake Blvd. # 11
STREET ADDRESS Lake Park, FL. 33408
CITY-ST-ZIP

TITLE DP ☐ Delete
NAME PETTERSON, FRED
STREET ADDRESS 9112 ALT. A1A, SUITE #103
CITY-ST-ZIP LAKE PARK FL 33403

TITLE ☒ Change ☐ Addition
NAME 450 Northlake Blvd. # 11
STREET ADDRESS Lake Park, FL. 33408
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
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TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

William Schrader

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-19-2000 561-882-9821

Date

Daytime Phone #

CR2E034 (9/99)