

**MICHIGAN
ANNUAL REPORT
NONPROFIT CORPORATIONS**

9318H5147 0409 N-MAR \$10.00
9318H5154 0409 DRG&FI \$5.00
FOR BUREAU USE ONLY

CORPORATION NUMBER

902013

1992 MAR 12 1993

**This Report must be filed on
or before October 1, 1992**

If the Resident Agent, Registered Office, or the mailing address of the Registered Office has changed, enter the corrections below and add \$5.00 to the \$10.00 filing fee. Make remittance payable to the State of Michigan.

<p>1. Corporate Name STRAIGHT, INC. 3001 GANDY BLVD. ST. PETERSBURG FL 33702</p>	<p>1a. Mailing address of registered office if different than 1</p>	<p>FILED BY DEPARTMENT APR 13 1993 FOR BUREAU USE ONLY</p>
<p>2. Resident Agent JUDITH PRESLAR</p>	<p>2a. Resident Agent if different than 2 HELEN GOWANNY</p>	
<p>3. Registered Office Address in Michigan - NO., STREET, CITY, ZIP 42320 ANN ARBOR RD. PLYMOUTH 48170</p>	<p>3a. Address of registered office if different than 3 - NO., STREET, CITY, ZIP</p>	

THE CORPORATION STATES THAT THE ADDRESS OF ITS REGISTERED OFFICE AND THE ADDRESS OF THE BUSINESS OFFICE OF ITS RESIDENT AGENT ARE IDENTICAL. ANY CHANGES WERE AUTHORIZED BY RESOLUTION DULY ADOPTED BY ITS BOARD OF DIRECTORS.

<p>4. Federal Employer Number 59-2576433</p>	<p>5. Term of Existence (if not perpetual) PERPETUAL *</p>	<p>6. The Act Under Which Incorporated (if other than 1931, P.A. 327 or 1982, P.A. 162) Chapter 617, Florida Statutes</p>
<p>7. State of Incorporation FL</p>	<p>8. Incorporation Date 9/26/85</p>	<p>9. Date of Admittance (Foreign Corporation) 01/15/1987</p>
<p>10. The value of all real and personal property and cash owned at the time of filing this report (IF NONE ENTER "NONE"): \$ NONE</p>	<p>11. The authorized capital stock value (if any): \$ NONE</p>	<p>11a. Number of shares: NONE</p>

12. Describe the purpose and activities of the corporation during the year covered by this report:
SUBSTANCE ABUSE TREATMENT PROGRAM FOR ADOLESCENTS AND THEIR FAMILIES.

13. What, if any, distribution of funds has been made to any member or shareholders during the year covered by this report. Explain your answer (IF NONE ENTER "NONE"):
NONE

14. Provide the total amount of any loans, advances, overdrafts or withdrawals and repayments thereof made to or by officers, directors, members, or shareholders of the corporation otherwise than in the ordinary and usual course of business of the corporation and on the ordinary and usual terms of repayment and security at the time of filing. Explain your answer (IF NONE ENTER "NONE"):
NONE

15. Corporate Officers and Directors - As of October 1, 1992 (Name, Street Address, City, State, ZIP Code)

President	WESLEY PENNINGTON, 442 RAYMOND AVE, LONGWOOD, FL 32750
If different than President	Secretary ELLIOTT L. CARR, 296 MIRROR LAKE DR., ST PETERSBURG, FL 33701
	Treasurer ELLIOTT L. CARR, 296 MIRROR LAKE DR., ST PETERSBURG, FL 33701
If different than Officers	Director BRUCE A. EPSTEIN, M.D., 9005 BAYWOOD PARK DR, SEMINOLE, FL 34647
	Director HERBERT GOLDSTEIN, Ph.D., 933 OLEANDER WAY S., ST PETERSBURG, FL 33707
	Director WALLACE H. NICHOLS, 116 PECKHAM ST SE, PORT CHARLOTTE, FL 33952
	Director MYRON J. MENSCH, ESQ., 5263 CENTRAL AVENUE, ST PETERSBURG, FL 33710

If the Mailing Address of the Registered Office, Resident Agent, or Registered Office has changed, this report must be **SIGNED IN INK** by either the President, Vice-President, Chairperson, Vice-Chairperson, Secretary, or Assistant Secretary of the corporation.

Anthony J. Agliardi
Signature of Authorized Officer or Agent

Chairman, Exec Comm
Title

4/5/93
Date

PREPARED BY NAME: **ANTHONY J. AGLIARDI**

DAYTIME TELEPHONE NUMBER: **(813) 576-8929**

APR 09 1993