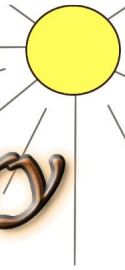




**Club
Recovery**
of Citrus County, Inc



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NEWS

Club Recovery Website



DAN@164fl.com

Volume 13, Issue 4 Phone: 352-419-4836 Location: 2500 N. Anvil Ter, Hernando FL April 2025



**"Relationship: Real Exciting
Love Affair Turns Insanely
Obsessive; Now Sobriety
Hangs in Peril."**

By Michael Z

Someone once said that getting into a relationship in early recovery is like throwing Miracle-Gro on your character defects. The danger comes from not having developed a proper relationship and reliance on a Higher Power; what happens is that the other person quickly becomes a Higher Power. Because people aren't perfect, this total reliance on someone almost always ends in frustration and hurt feelings.

The other problem comes from our self-obsessive natures. Self-centered in the extreme and new to recovery, we obsessively use the other person to fill the tremendous void we still feel. We soon find, however, that our self-seeking continues to get us nowhere, and before long we stand at the precipice with our nascent sobriety in danger.

Over time, we come to understand the importance of developing and relying on a right relationship with God. We learn to turn our character defects over to Him and to give of ourselves unselfishly, knowing that our true purpose is to be of service to others. Once we are on this right footing, all our relationships flow smoothly, and we finally experience the peace and serenity we always sought. Now, we can bring this sense of peace to a relationship rather than rely on the relationship to give it to us.

Here at Club Recovery, we want your visit with us to be a safe one. If for any reason you do not feel safe, contact one of our board members and the matter will be addressed promptly.

Bill A, President

**LOVE AND
TOLERANCE**

March 20

*Love and tolerance of
others is our code.*

ALCOHOLICS ANONYMOUS, p. 84

I have found that I have to forgive others in all situations to maintain any real spiritual progress. The vital importance of forgiving may not be obvious to me at first sight, but my studies tell me that every great spiritual teacher has insisted strongly upon it.

I must forgive injuries, not just in words, or as a matter of form, but in my heart. I do this not for the other persons' sake, but for my own sake. Resentment, anger, or a desire to see someone punished, are things that rot my soul. Such things fasten my troubles to me with chains. They tie me to other problems that have nothing to do with my original problem.

TRUSTEE MEETING

The Board of Trustees meets on the 2nd Saturday of every month at 11:30. We welcome your input by placing your comments in the suggestion box located in the hallway, or see a Trustee. Remember: safety and inclusivity are the objectives here.

The Move



After two years of planning, dreaming and negotiating Club Recovery finally moved to our new location at the Old Schoolhouse Community Center, Henando. The move was smooth but required planning and physical labor. Gas griddles and smokers were moved. Cabinets, counters and bookcases were dismantled and readied to install at the Schoolhouse. Club and program materials were packed up and available for business by the time the Heading Home Group met that evening. The last AA meeting at the Old Club Recovery was at 8 am Saturday March 15, 2025. The first meeting in the Old Schoolhouse was 6 pm the day of the move and there was a packed room. In weeks prior to the move, preparation was immense and required community effort. Daily several members of the recovering community and local churches worked at building and repairing walls, hanging doors, stripping and refinishing floors, painting the entire interior and rebuilding the parking lots. The result is a facility we can be proud of.

Happy St. Patrick's Day



The St. Patrick's Day feast was successful with great food and warm fellowship. The people who put it together did a great job. Considering that they pulled it off the day we moved in, hats off to them! The corned beef and cabbage was delicious and the desserts plentiful and tasty. The auditorium proved to be a good venue, spacious, well-lit and comfortable. Let's hope we see more festivities there!

CLEANING UP IS EVERYONE'S RESPONSIBILITY

Well folks although it has been a long and challenging journey, we've made it. The **Old Schoolhouse Community Center** opened for use on March 15, 2025. Thank you to our officers who worked hard and were able to get a signed lease on January 14, 2025. From that day forward many people spent countless hours turning the building into what it is today. Their efforts have given us a building we can proudly call home.

The building will not have its own, personal janitor to keep it clean. So in order, to maintain our home we will all need to clean up after ourselves. If everyone makes a habit of cleaning up the job becomes easier. Please remember this is our home for meetings and fellowship. Let's all do our part keeping it neat and clean.

Club Recovery Bord of Trustees

ANONYMITY POLICY

The Old Schoolhouse Community Center dba Club Recovery of Citrus County, Inc. is now open for recovery meetings and much more. Club Recovery is dedicated to making the community center a safe and inclusive space for gatherings. Anonymity is of great importance to those in recovery. Be aware that not all who come to the center are in recovery. They may not understand anonymity and therefore we in recovery need to be kind, loving, patient, and tolerant. Those who are not in recovery need to understand that recovery is a personal, spiritual experience.

Club Recovery Bord of Trustees

Coping Skills

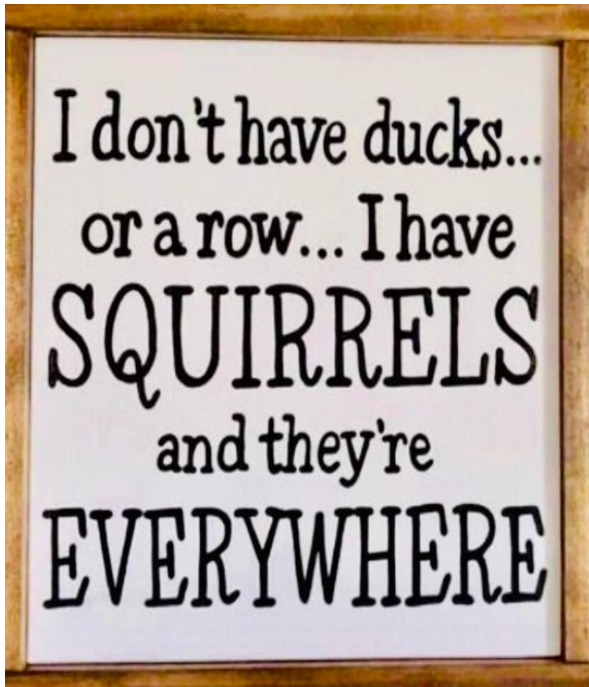
Two important coping skills for recovery are the ability to relax and manage stress, and the ability to change negative thinking.

Stress management and meditation are now being used regularly in medicine. The evidence is overwhelming that they are effective in treating anxiety, depression, and addiction. When you're tense you tend to do what's familiar and wrong instead of what's new and right. When you're tense, you're not open to change.

Cognitive behavioral therapy is important because negative thinking is a major cause of anxiety and depression which often underlie addiction. If you can change your thinking, you will improve your life.



When is the next meeting?



Visual Arts Studio

There appears to be no interest in local oil painters or sculptors showing their talents here in The Club Recovery News, beside myself.

If we have interest in the future, this section will return.

Contact John L at:
levasseurjohn@hotmail.com.

Road To Recoveries A place where you



<http://roadtorecoveries.blog>

My Blog has been active for 10 years, but no one knows about it. It is 40 of my writings from the three published recovery related books. Please feel free to take a look and leave comments.

Thank You...

John L
Newsletter Editor/Trustee



Renee Ross
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A1 Alarm Systems installed our present system 10 years ago and has maintained it since. Steve, the owner has always treated Club Recovery very good. Thank you Steve.

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Florida Notary

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Hernando, Florida
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levasseurjohn@hotmail.com




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This service is only open to those involved with addiction recovery.

Get the word out, help another recovering person, and make some extra money in doing so.

Club Recovery Membership

If you would like to be a paying member of Club Recovery see the Duty Officer and they will get you signed up. Dues are \$10 a month, \$25 for 3 months, \$90 for a year, and couples \$150. Membership dues are used for the day to day operation of the club, along with rent from the groups. Without the membership it would be hard to maintain the facility we have. We would like to double the number of members in the coming year. Please consider joining or updating your membership.

"Hope is the key that unlocks the door of discouragement."

Daily Reflections p.70
By Ted W—First Things First Group

Keys are used to lock doors as well, but in this case people in AA are using it to unlock a door which one would presume is then swung open. Is there any reason to unlock a door other than to open it? What possible purpose could there be to unlocking and opening the door of discouragement if not to become discouraged? Hope is not a prophylactic for discouragement. It doesn't prevent one from becoming discouraged when one's hopes are crushed under the weight of the harsh realities of life. Hope unlocks and opens the door of discouragement, but does this mean we should refrain from hope? Is the converse equally true that suppressing hope closes and locks away discouragement? When one gives up all hope, how is it possible to become discouraged? When one gives up trying, there is no room for discouragement because there is no expectation of success. Hopelessness is the first step one takes into hell which is why the entrance to Dante's "Inferno" has this sign posted: "Abandon hope all who enter here."



Unlike Dante, this author may be pointing out that discouragement is a possibility or even a probability without necessarily becoming a necessity. Perhaps the message is that even though discouragement could be inevitable,

this in and of itself isn't enough reason to abandon hope.

What I do know is that I've never had high hopes or expectations of recovery in recovery. Without those expectations, I'm always amazed at not just the fact that this program works, but how rapidly the promises materialize. I had a number of those moments of clarity beginning with the realization that I needed to stop drinking. The very next moment of clarity followed soon after as I woke up in a hospital and suddenly realized that if I exerted a fraction of the effort that was expended to "drink like a gentleman" or drink without wrecking a vehicle, wrecking myself, getting arrested, murdered, etc. etc. then I had nothing to worry about. I intuitively knew everything was going to be okay regardless of what the future held for me.

Someone once claimed that even if they knew the world would end tomorrow, they would still plant a tree today. Again, I am confident that there are alcoholics who can relate to that level of hopelessness for the future, yet despite this realization, they have no choice but to take that next step towards recovery. Even if only for today, ultimately it's all we have.

"Do what you can, with what you have, where you are." —Theodore Roosevelt

"The best way to predict the future is to create it." —Abraham Lincoln

"It does not matter how slowly you go as long as you do not stop." —Confucius

"The way to get started is to quit talking and begin doing." —Walt Disney

"Success is not final, failure is not fatal: It is the courage to continue that counts." —Winston Churchill

Happiness is not something we find,
it's something we create

A Dog's Life

RoadToRecoveries.BLOG

Posted on October 16, 2024 by John Levasseur



If you have a dog, you'll understand where I come from. Some cat lovers get the same message, but not like a dog. I guess any pet you're close to would be the same. If you're not a pet lover, bear with me, you might still get the message.

She's a 13-year-old Papillion named Cricket. Papillion is not a common breed, but she doesn't know it. She's smart, easy to care for, and adorable. She has enormous ears and looks somewhat like a small Collie. Alright, enough about what she looks like. The point is what she's taught me over the years.

Like most in Recovery, Cricket needs lots of emotional support. In some programs, she would be seen as needy. Whenever I look behind me, there she is. I'll give her a pat on the head, and she's satisfied for a while. Do you know people are like that? Most AAs I know require attention, especially early in recovery, and there's nothing wrong with that.

Another cool thing about my dog is she doesn't need a cell phone to call her mother or friends to chat. She has no credit cards, although when we go to PetSmart, she has no problem using mine. She has no driver's license either. Of course, that would be silly as she couldn't reach the peddles. However, she does love to pretend she's driving when her head is out the window in the wind. It doesn't matter if its winter or summer, in the wind is where she's happy. When I drove a motorcycle, I experienced what she loves to do.

She hasn't a clue if there's any food in the cupboards or when we might get some. When Moses was in the desert, God told him not to save food as it would be provided. Somehow, Cricket knows that. She does have health insurance, and it's a lot cheaper than mine. Her simple life screams, One Day at a Time. Why can't I live my life like her?

The simple truth is I can if I trust that God will not give me any more than I can handle for today. Looking back over the years of trusting God, I never was hungry or didn't have a roof over my head. All the debt I've accumulated has been paid. All I had to do was trust. Cricket believes, so why is it that I forget and suffer needlessly? All I have to do is look behind me; all my answers are in these eleven pounds of fur.

God bless man's best friend.—2025 Cricket is waiting for me at The Rainbow Bridge when it's my time.

I now pray that the CAUSE of my character defect be healed

What is fentanyl?



Fentanyl is a powerful synthetic opioid. Medically, it is used to treat severe pain or to manage pain after surgery, and is sometimes used to treat patients with chronic pain who are physically tolerant to other opioids.[1]

Prescription fentanyl is available under such names as Actiq®, Duragesic®, and Sublimaze® in the form of tablets, an injectable liquid, lozenges and patches.

When it is intentionally misused, fentanyl often shows up as a powder, spiked on blotter paper or is mixed with or substituted for heroin and other street drugs.

Fentanyl carries a high risk of overdose and fatality. To put it in perspective, it's 50 to 100 times more potent than morphine. According to the CDC, overdoses involving synthetic opioids increased by 72.2% from 2014 to 2015.

Why is it so dangerous?

In high enough doses, opioids can cause breathing to stop completely. Fentanyl's strength increases this risk of overdose substantially. Synthetic opioids sold illicitly can be mixed with heroin or cocaine, which amplifies its potency and potential danger. This is particularly dangerous if an individual who uses illegal substances like heroin or intentionally misuses prescription drugs is unaware that fentanyl could be in it.

Overdoses of these drugs may require higher doses of naloxone to successfully reverse the overdose.[1]

How can I protect my loved one?

If you know or suspect that your loved one is using or may be at risk of using fentanyl, it is very important to help them reduce the risks associated with use.

Some strategies include:

- Carrying naloxone at all times in case of an accidental overdose. Higher quantities of naloxone may be necessary to reverse fentanyl-related overdoses.
- Testing any illicit substances before use with fentanyl test strips.
- Using clean and sterile needles to reduce the transmission of diseases like HIV.
- Help educate your loved one on the risks of fentanyl and make sure they know these harm reduction strategies.

If your loved one is struggling with opioid use, the resources below may be helpful. In Citrus County, That Anti Drug Coalition can be contacted.

Web Site [Anti Drug Coalition of Citrus County](#)

Continue on next page

Naloxone Facts

What are some signs of an opioid overdose?

- unconsciousness
- very small pupils
- slow or shallow breathing
- vomiting
- an inability to speak
- faint heartbeat
- limp arms and legs
- pale skin
- purple lips and fingernails

What is naloxone?

Naloxone is a medicine that rapidly reverses an opioid overdose. It is an opioid antagonist. This means that it attaches to opioid receptors and reverses and blocks the effects of other opioids. Naloxone can quickly restore normal breathing to a person if their breathing has slowed or stopped because of an opioid overdose. But, naloxone has no effect on someone who does not have opioids in their system, and it is not a treatment for opioid use disorder. Examples of opioids include heroin, fentanyl, oxycodone (OxyContin®), hydrocodone (Vicodin®), codeine, and morphine.

How is naloxone given?

Naloxone should be given to any person who shows signs of an opioid overdose or when an overdose is suspected. Naloxone can be given as a nasal spray or it can be injected into the muscle, under the skin, or into the veins. Steps for responding to an opioid overdose can be found in the Substance Abuse and Mental Health Administration's (SAMHSA) Opioid Overdose Prevention Toolkit.

What are the different naloxone delivery systems?

Naloxone comes in two FDA-approved forms: injectable and prepackaged nasal spray. No matter what dosage form you use, it's important to receive training on how and when to use naloxone. You should also read the product instructions and check the expiration date.

Prepackaged Nasal Spray (generic naloxone, Narcan®, Kloxxado®), developed as a result of NIDA-funded research, is an FDA-approved prefilled, needle-free device that requires no assembly and is sprayed into one nostril while the person lays on their back. This device can also be easier for loved ones and bystanders without formal training to use.

Is Narcan® the same as naloxone?

When naloxone was first approved to reverse opioid overdoses, its brand name was "Narcan." There are now other formulations and brand names for naloxone, but many people continue to call all of these products "Narcan." However, the proper generic name is "naloxone."

Is there a preferable delivery system?

All systems used by first responders deliver the stated dose of naloxone and can be highly effective in reversing an opioid overdose. Study findings released in March 2019 suggests that the FDA-approved naloxone devices deliver higher blood levels of naloxone than the improvised nasal devices.

Can I give naloxone to someone who has overdosed?

Yes. Families with loved ones who struggle with opioid addiction should have naloxone nearby; ask their family member to carry it; and let friends know where it is. People should still call 911 immediately in the event of an overdose.

Naloxone is being used more by police officers, emergency medical technicians, and non-emergency first responders than before. In most states, people who are at risk or who know someone at risk for an opioid overdose can be

trained on how to give naloxone. Families can ask their pharmacists or health care provider how to use the devices.

What precautions are needed when giving naloxone?

Naloxone works to reverse opioid overdose in the body for only 30 to 90 minutes. But many opioids remain in the body longer than that. Because of this, it is possible for a person to still experience the effects of an overdose after a dose of naloxone wears off. Also, some opioids are stronger and might require multiple doses of naloxone. Therefore, one of the most important steps to take is to call 911 so the individual can receive immediate medical attention. NIDA is supporting research for stronger formulations for use with potent opioids like fentanyl.

People who are given naloxone should be observed constantly until emergency care arrives. They should be monitored for another 2 hours after the last dose of naloxone is given to make sure breathing does not slow or stop.

Tolerance vs. Dependence vs. Addiction

Long-term use of prescription opioids, even as prescribed by a doctor, can cause some people to develop a tolerance, which means that they need higher and/or more frequent doses of the drug to get the desired effects.

Drug dependence occurs with repeated use, causing the neurons to adapt so they only function normally in the presence of the drug. The absence of the drug causes several physiological reactions, ranging from mild in the case of caffeine, to potentially life-threatening, such as with heroin. Some chronic pain patients are dependent on opioids and require medical support to stop taking the drug.

Drug addiction is a chronic disease characterized by compulsive, or uncontrollable, drug seeking and use despite harmful consequences and long-lasting changes in the brain. The changes can result in harmful behaviors by those who misuse drugs, whether prescription or illicit drugs.

People with physical dependence on opioids may have withdrawal symptoms within minutes after they are given naloxone. Withdrawal symptoms might include headaches, changes in blood pressure, rapid heart rate, sweating, nausea, vomiting, and tremors. While this is uncomfortable, it is usually not life threatening. The risk of death for someone overdosing on opioids is worse than the risk of having a bad reaction to naloxone. Clinicians in emergency room settings are being trained to offer patients immediate relief and referral to treatment for opioid use disorder with effective medications after an opioid overdose is reversed. NIDA offers tools for emergency clinicians here.

Side effects from naloxone are rare, but people might have allergic reactions to the medicine. Overall, naloxone is a safe medicine. But it only reverses an overdose in people with opioids in their systems and will not reverse overdoses from other drugs like cocaine or methamphetamine.

How much does naloxone cost?

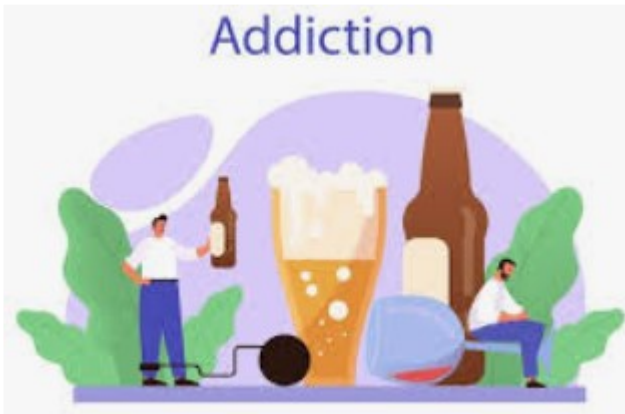
The cost varies depending on where you get the naloxone, how you get it, and what type you get. Patients with insurance should check with their insurance company to see if this medicine is covered. Patients without insurance can check the retail costs at their local pharmacies. Some drug companies have cost assistance programs for patients unable to pay for it.

Where can I get naloxone?

Anti Drug Coalition can be contacted.

Web Site [Anti Drug Coalition of Citrus County](#)

Love your enemies, do good to those who hate you,
bless those who curse you, pray for those who
mistreat you. ~Jesus



The Facts about Alcohol Cravings and How to Beat Them

Hazelden Betty Ford Foundation—Published Aug 26, 2020

Ultimately, cravings are not our fault. They're a natural symptom of addiction.

For those of us who have grown comfortable in our recoveries, the unexpected arrival of alcohol cravings can be really disorienting. Our recoveries are strong, we have trusted communities and support networks around us and we've transitioned into an easier stage in recovery where we don't grip so tightly onto sobriety. But then a craving comes along and triggers us. And all of a sudden, no matter how long we've been in recovery, we think we might go about drinking safely.

Although our alcohol cravings have become less frequent or completely unfamiliar since the first days of our recoveries, the effects of alcohol cravings are always the same. And when we give credence to these cravings, we might mislead ourselves into erroneous thinking (or even drinking): we may question whether we actually have the disease of addiction or we may focus on the highlights of our active addiction and forget its countless dangers or any number of stories our addiction might spin for us.

In this article, we'll explain the different types of cravings and discuss our best options to beat those cravings and refocus on the natural, long-lasting rewards of recovery.

What Are Alcohol Cravings Exactly? Do They Have Specific Symptoms?

Although there are some scientific disagreements about how to define craving, we can still extract the most important elements of alcohol cravings to create a workable definition for those in recovery.

When we crave alcohol, we are in a state of anticipation: we want to drink or use other drugs. And this can be caused by withdrawal, or it can be a response to certain stimuli, like being surrounded by people who are drinking or a fond memory where drinking was involved.

When we crave, the effects on our bodies can be variable or even contradictory: some may experience heightened arousal while others experience depressed heart rates. The point is, alcohol cravings are highly subjective, and we have to learn the things that trigger our cravings and create a plan to curb them. Ultimately, cravings are not our fault. They're a natural symptom of addiction.

Your Brain Is to Blame for Cravings

As mentioned above, cravings result from either a withdrawal or the presence of a trigger. For those of us with sustained recoveries, the cues and triggers are typically the cause of our cravings. Either way, cravings are always born in the brain.

When we withdraw from alcohol, the suppression of certain neurochemicals will make the brain demand more alcohol so it can reach homeostasis, or its normal state of functioning (where alcohol is now deeply involved). More simply, our brains begin to regulate themselves with alcohol. Without it, the brain makes chemical demands and requests for alcohol.

Continue on next page

For the cue-induced craving, it has to do with memory. Alcohol and other drugs flood our brain with reward chemicals like dopamine. Long after our last drink, our brains and memories still associate drinking with this flood of reward. When we're exposed to a cue or stimulus that triggers those latent memories, our brains beg us for more reward chemicals. And thus a craving is born.

How Should We Handle Cravings for Alcohol?

The type of craving will determine how we should respond to it. If we are still drinking or have yet to enter into recovery, cravings for alcohol are likely a physiological and neurological response to the departure of alcohol from our bodies, known as withdrawal. We would be best served by consulting a medical or treatment professional and asking for help so we don't have to rely on self-control alone.

If we are dealing with cravings as a result of cues or triggers, we need to make a plan. Obviously, we cannot undo our brain's relationship with alcohol entirely. Our alcohol use disorder means our brains already have a whole host of associations with alcohol that we cannot undo with a snap. And alcohol is a huge part of our culture: celebration, mourning, boredom and tons of other feelings are all commemorated with alcohol. Which means that triggers are aplenty.

Crafting a Plan to Curb Our Cravings for Alcohol

As a part of any relapse prevention plan, we should begin by identifying patterns and trends. What are the cues or triggers that make us crave alcohol? We can start with a list with three columns:

The cues that happen to us, like beer ads or debt collection
 The activities we partake in, like going to a ball game or trivia night at a friend's place
 The strategies we can use to calm ourselves, like meditation or exercise
 By identifying the cues and triggers that make us crave drinking, we can begin to predict, prepare for and act against a large subset of triggers.

For the cues that are wholly unpredictable, we can still use our list of calming strategies to refocus our energy away from the temporary discomfort: our cravings are always brief unless we act upon them. If we acknowledge our feelings and allow them to harmlessly rise and fade, we have little to fear.

And then we rely on our support networks for the things we cannot handle alone.

The Takeaway for Cravings

Ultimately, cravings are a natural symptom of addiction. Of course it's unexpected, uncomfortable and even confusing when we crave a drink or drug after years without. Our neurological pathways and memories are conditioned to respond with cravings, but our brains will continue to rewire themselves with a little planning, patience and time. We just have to give recovery its chance.

GRAPEVINE Daily Quote

February 28, 2025

“I started to understand that while I didn’t believe in churches, I had to see that something or someone was working in my life that hadn’t been there before.”

Get With the Program,” Naples, Italy, January 1994, Beginner’s Book: Getting and Staying Sober in AA

March 7, 2025

“If there are challenges to be met today, I remember other days when what seemed impossible was made possible.”

“Never Sober Today Before,” Huntington, West Virginia, August 2006, Beginner’s Book: Getting and Staying Sober in AA

February 3, 2025

“What matters is what works, not my opinion of what works.”

“Trusting the Silence,” November 1991, Beginner’s Book: Getting and Staying Sober in AA

March 11, 2025

“Because of this program I am starting to love myself again. I still get urges to ‘drink and drug’ but I don’t let them run my life. I value good friends today. I value my serenity, and I value life today.”

“A Valuable Commodity,” Thornton, Pennsylvania, April 1993, AA Grapevine

Freedom House Group



Celebration Eat and Meet

*River of Life Church
2872 W Dunnellon RD (488)
Dunnellon, FL*

FOOD



FUN

FELLOWSHIP

Tuesday, April 22, 2025

Food 6:00 PM

Meeting 7:00 PM

Ham Provided. Please bring a side dish or dessert if you are able.

MEETINGS AT CLUB RECOVERY

- SUNDAY:** 9:00am—Keep It Simple Group—AA—Closed Discussion
 2:00pm—Nature Coast Unity Group—NA
 3:45pm—ACA—Adult Children of Alcoholics
 6:00pm—First Thought Wrong Group—AA—OD
 8:00pm—Into the Solution—AA—BB—O
- MONDAY:** 8:00am—First Things First—AA—OD
 10:00am—Woman's Friendship Group—AA—Women's
 12:00pm—Sober Nooner Our Primary Purpose—AA—OSD
 6:00pm—Heading Home Group—AA
 8:00pm—First Thought Wrong Grp—AA—Joe & Charlie Tapes
- TUESDAY:** 8:00am—First Things First—AA—OD
 12:00pm—Sober Nooner's—AA—OD—Easy Does It
 2:00pm—Nature Coast Unity Group—NA—O
 6:00pm—Heading Home Group—AA—Living Sober Book Mtg.
 8:00pm—First Thought Wrong Grp—AA—BB
- WEDNESDAY:** 8:00am—First Things First—AA—OD
 12:00pm—164 Group - Mad Dog Big Book Study —AA—BB
 6:00pm—Heading Home Group—AA—Beginners
 8:00pm—First Thought Wrong Grp—AA
- THURSDAY:** 8:00am—First Things First—AA—BB Study
 12:00pm—Sober Nooner's—AA—O—Big Book
 1:30pm—Al Anon Meeting
 6:00pm—Heading Home Group—AA
 8:00pm—First Thought Wrong, Beginner's—AA
- FRIDAY:** 8:00am—First Things First—AA—OD
 12:00pm—Sober Nooner's—AA—Step
 4:00pm—Beginners Bible Study—Open—Book of John
 6:00pm—Heading Home Group—AA—O
 7:30pm—Old Schoolhouse Men's Meeting—AA
- SATURDAY:** 8:00am—First Things First—AA—OD
 10:00am—Sober Nooner's Easy Does It—AA
 6:00pm—Heading Home Group—Speaker, AA

Open Hours:

Mon-Sat
 7:30AM—9:30PM

Sunday
 8:30 AM-7:30PM

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 Hernando, FL
 34442

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SOBER ANNIVERSARY'S

Any group or individual can be listed in our newsletter.

Send list early in the month to:
LEVASSEURJOHN@hotmail.com

You do not have to be a member of Club

ANNIVERSARIES:

April 2025

First Thought Wrong Group

- Shirley M 43
- Jackie K 17
- Paul M 5
- Mike G 4

Heading Home Group

- George M 38
- Brian M 19
- Don W 11
- Carla A 8

First Things First Group

- Shirley M 43
- Bob P 34
- Wendell 32
- Chicago Mike 30

SALE

Club Recovery Tee Shirts
 Just \$20

ALL proceeds will be used to help us find a new home for the Club.

Thanks for your support!

