

# 2010 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N08000004030

**FILED**  
**Jan 13, 2010**  
**Secretary of State**

**Entity Name:** DOMESTIC VIOLENCE TASK FORCE, INC.

**Current Principal Place of Business:**

411 S. 2ND STREET  
C/O THE OFFICE OF THE STATE ATTORNEY  
FORT PIERCE, FL 34950

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 8594  
PORT ST. LUCIE, FL 349858594

**New Mailing Address:**

P.O. BOX 3589  
FORT PIERCE, FL 349483589

**FEI Number:** 26-2569575      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired (X)**  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

KIRBY, CHERYL  
411 S. 2ND STREET  
C/O THE OFFICE OF THE STATE ATTORNEY  
FORT PIERCE, FL 34950 US

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

O'NEIL, DONNA  
2155 33RD AVE.  
VERO BEACH, FL 32960 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: DONNA O'NEIL

01/13/2010

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: KIRBY, CHERYL  
Address: P.O. BOX 3589  
City-St-Zip: FORT PIERCE, FL 349483589

Title: VP  
Name: BOROWICZ, JILL  
Address: P.O. BOX 3589  
City-St-Zip: FORT PIERCE, FL 349483589

Title: S  
Name: SHARP, ARLINE  
Address: P.O. BOX 3589  
City-St-Zip: FORT PIERCE, FL 349483589

Title: T  
Name: O'NEIL, DONNA  
Address: P.O. BOX 3589  
City-St-Zip: FORT PIERCE, FL 349483589

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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: DONNA O'NEIL

T

01/13/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date