

2009 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N08000007710

Entity Name: LOVING & CARING, INC.

FILED
Nov 04, 2009
Secretary of State

Current Principal Place of Business:

504 8TH ST
LAKE PARK, FL 33403

New Principal Place of Business:

Current Mailing Address:

504 8TH ST
LAKE PARK, FL 33403

New Mailing Address:

P.O.BOX 55
WEST PALM BEACH, FL 33402

FEI Number: 90-0407869 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
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:

SAINTELUS, SIMONE A
504 8TH ST
LAKE PARK, FL 33403 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: ALEXANDRE SAINTELUS SIMONE

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: SAINTELUS, SIMONE A
Address: 504 8TH ST
City-St-Zip: LAKE PARK, FL 33403

Title: D () Delete
Name: BAPTISTE, VIVIANE J
Address: 504 8TH ST
City-St-Zip: LAKE PARK, FL 33403

Title: D () Delete
Name: ALEXANDRE, GAUBERT
Address: 504 8TH ST
City-St-Zip: LAKE PARK, FL 33403

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: ALEXANDRE, GAUBERT
Address: 2121 TALAHASSEE DRIVE
City-St-Zip: WEST PALM BEACH, FL 33409

Title: OFF. () Change (X) Addition
Name: HYPPOLITE, DELMAS OFFICER
Address: 7635 BRISTOL CIR
City-St-Zip: NAPLES, FL 34120

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: ALEXANDRE SIMONE/ DELMAS HYPPOLITE

OFF

11/04/2009

Electronic Signature of Signing Officer or Director

Date