

2007 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N97000005292

Entity Name: ST. FRANCIS SOCIETY, INC.

FILED
Feb 26, 2007
Secretary of State

Current Principal Place of Business:

1911 LAKE PLATT LANE
TAMPA, FL 33618

New Principal Place of Business:

1911 LAKE PLATT LANE
TAMPA, FL 33618 US

Current Mailing Address:

1911 LAKE PLATT LANE
TAMPA, FL 33618

New Mailing Address:

1911 LAKE PLATT LANE
TAMPA, FL 33618 US

FEI Number: 59-3469332 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:

STAFFORD, STU
15951 N. FLORIDA AVE.
LUTZ, FL 33549 US

Name and Address of New Registered Agent:

STAFFORD, STU
1515 DALE MABRY HIGHWAY
SUITE 102
LUTZ, FL 33548 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: STU STAFFORD

02/26/2007

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: CALKIN, RON
Address: 712 GATEWAY LANE
City-St-Zip: TAMPA, FL 33613

Title: D () Delete
Name: ALUISY, RAQUEL
Address: 1911 LAKE PLATT LANE
City-St-Zip: TAMPA, FL 33618

Title: P () Delete
Name: KAPUSTA, MICHELLE
Address: 3306 LITTLE ROAD
City-St-Zip: VALRICO, FL 33594

Title: T () Delete
Name: MEXICOTTE, CHRISTINA
Address: 3306 LITTLE ROAD
City-St-Zip: VALRICO, FL 33594

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

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: ESPINOLA, SHARON
Address: 504 SHADOW GROVE COURT
City-St-Zip: LUTZ, FL 33548

Title: D/P (X) Change () Addition
Name: ALUISY, RAQUEL
Address: 1911 LAKE PLATT LANE
City-St-Zip: TAMPA, FL 33618

Title: T (X) Change () Addition
Name: DIFABBIO, MICHAEL
Address: 1911 LAKE PLATT LANE
City-St-Zip: TAMPA, FL 33618

Title: D (X) Change () Addition
Name: WINTHROP, JULIE
Address: 505 OAKWOOD BLVD.
City-St-Zip: OLDSMAR, FL 34677

Title: D () Change (X) Addition
Name: WALVOORD, KATHY
Address: 11229 SHADYBROOK DR
City-St-Zip: TAMPA, FL 33625

Title: D () Change (X) Addition
Name: MARUCA, MARY JO
Address: 14057 CITRUS POINT DR.
City-St-Zip: TAMPA, FL 33625

I hereby certify that the information supplied with this filing does not qualify for the 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: RAQUEL ALUISY

P

02/26/2007

Electronic Signature of Signing Officer or Director

Date