2009 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# 709311

FILED May 05, 2009 Secretary of State

Entity Name: SOCIETY OF ST. VINCENT DE PAUL, COUNCIL OF PENSACOLA-TALLAHASSEE, INC.

Current Principal Place of Business: New Principal Place of Business:

2200 W. DESOTO ST. PENSACOLA, FL 32505 US

Current Mailing Address: New Mailing Address:

P.O. BOCX 16047 2200 W. DESOTO ST. PENSACOLA, FL 32507 PENSACOLA, FL 32505 US

FEI Number: 59-2374931 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

STEBBINS, MICHAEL J 504 NORTH BAYLEN ST PENSACOLA, FL 32501 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: MICHAEL J. STEBBINS, P.L.

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

le: VD () Delete Title: PD (X) Change () Addition

 Name:
 PUGSLEY, ROSE
 Name:
 KRUMEL, VIVIAN

 Address:
 800 VAN PELT LANE
 Address:
 3920 MONTEIGNE DRIVE

 City-St-Zip:
 PENSACOLA, FL 32505 US
 City-St-Zip:
 PENSACOLA, FL 32504 US

Title: PD () Delete Title: V-PD (X) Change () Addition

 Name:
 DESPOSITO, MARTHA
 Name:
 HAHNER, RICHARD

 Address:
 5460 NORTH SHORE ROAD
 Address:
 2730 SEMORAN DRIVE

 City-St-Zip:
 PENSACOLA, FL 32507 US
 City-St-Zip:
 PENSACOLA, FL 32503 US

Title: () Delete Title: SEC (X) Change () Addition REMICH, PAT KREZEMINISKI, PATRICIA Name: Name: 4069 CURLEW DRIVE Address: 903 RIDGEWOOD LANE Address: City-St-Zip: PENSACOLA, FL 32506 US City-St-Zip: PENSACOLA, FL 32514 US

Title: SD () Delete Title: TREA (X) Change () Addition

 Name:
 LEIDNER, KATHLEEN
 Name:
 REMICH, PAT

 Address:
 1510 E HERNANDEZ ST
 Address:
 903 RIDGEWOOD LANE

 City-St-Zip:
 PENSACOLA, FL 32507 US
 City-St-Zip:
 PENSACOLA, FL 32506 US

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: MICHAEL J. STEBBINS, P.L. RA 05/05/2009