

2010 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# 726212

FILED
Sep 28, 2010
Secretary of State

Entity Name: HANDS ON JACKSONVILLE, INC.

Current Principal Place of Business:

6817 SOUTHPOINT PKWY STE 1902
JACKSONVILLE, FL 32216 US

New Principal Place of Business:

Current Mailing Address:

6817 SOUTHPOINT PKWY STE 1902
JACKSONVILLE, FL 32216 US

New Mailing Address:

FEI Number: 59-1466484

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SMITH, JUDITH A
6817 SOUTHPOINT PKWY STE 1902
JACKSONVILLE, FL 32216 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: JUDITH A. SMITH

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: C/D
Name: SPOHRER, ROBERT
Address: 701 W. ADAMS ST. STE 2
City-St-Zip: JACKSONVILLE, FL 32204

Title: C/D
Name: MACFERRAN, DAN
Address: 4500 SALISBURY RD. STE 200
City-St-Zip: JACKSONVILLE, FL 32216

Title: T/D
Name: CLEVELAND, HOLLY
Address: 225 WATER ST. 3RD FLOOR
City-St-Zip: JACKSONVILLE, FL 32202

Title: P/D
Name: SMITH, JUDITH A
Address: 6817 SOUTH POINT PKWY-STE 1902
City-St-Zip: JACKSONVILLE, FL 32216

Title: D
Name: BROWN, LAURA
Address: 103 CHAMPIONS WAY
City-St-Zip: PONTE VEDRA BEACH, FL 32082

Title: S/D
Name: ORR, KATHY
Address: 133 RETREAT PLACE
City-St-Zip: PONTE VEDRA BEACH, FL 32082

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: JUDITH A. SMITH

P/D

09/28/2010

Electronic Signature of Signing Officer or Director

Date