2005 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT # 745792

1. Entity Name
RONALD MCDONALD HOUSE OF GAINESVILLE, INC.

FILED
05 OCT 18 PM 12:18
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business	Mailing Address
1600 SW 14TH ST. GAINESVILLE, FL 32608	1600 SW 14TH ST. GAINESVILLE, FL 32608

10072005 REIN-NP CR2E099 (6/04)

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 59-1887896 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☑ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
KIDNEY, GERALD R JR 5731 NW 31 ST GAINESVILLE, FL 32653	Name Walker, Carol Street Address (P.O. Box Number is Not Acceptable) 40 Turkey Creek City Alachua FL Zip Code 32615

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE Carol Walker 10/7/05
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS $61.25
After January 1, 2006, Fee will be $122.50

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Make check payable to Florida Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D KIDNEY, GERALD R. 5731 NW 31 TERR. GAINESVILLE, FL 32653	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Treasurer 300060727523 10/18/05--01078--015 **70.00	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD GIUNTA, NANCY 164 TURKEY CREEK ALACHUA, FL 32615	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Secretary Oglesby, Carol 1503 SE 69th Way Gainesville, FL 32641	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD NEIBERGER, RICHARD 1302 NW 30TH ST GAINESVILLE, FL 32605	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD WALKER, CAROL 40 TURKEY CREEK ALACHUA, FL 32615	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	President	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D URBAN, FRANK 5527 SW 37 DR. GAINESVILLE, FL 32608	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	10/24	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD WHITNEY, MARYANN 27211 NW 8 LANE NEWBERRY, FL 32669	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Vice-President	☑ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Carol Walker 10/7/05
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

PD. 10-11-05
check # 0465
$ 7.00