2009 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

FILED
Sep 30, 2009
Secretary of State

DOCUMENT# 750772

Entity Name: ALPHA HOUSE OF PINELLAS COUNTY INC.

Current Principal Place of Business:

701-5TH AVENUE NORTH
ST. PETERSBURG, FL 33701

New Principal Place of Business:

Current Mailing Address:

701-5TH AVENUE NORTH
ST. PETERSBURG, FL 33701

New Mailing Address:

FEI Number: 59-1991525 **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:

D & B CORPORATE SERVICES, INC
5999 CENTRAL AVENUE
SUITE 02
ST.PETERSBURG, FL 33710 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: JENNIFER STRACICK
Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: SAUNDERS, JOSEPH
Address: 550 SANDY HOOK RD
City-St-Zip: TREASURE ISLAND, FL 33706

Title: PD ( ) Delete
Name: MALALINO, LONNIE
Address: 14031 EGRET LANE
City-St-Zip: CLEARWATER, FL 33672

Title: ED ( ) Delete
Name: STACICK, JENNIFER
Address: 2628 27TH AVENUE NORTH
City-St-Zip: SAINT PETERSBURG, FL 33713

Title: DVP ( ) Delete
Name: DEEB, THERESA
Address: 5999 CENTRAL AVE, #202
City-St-Zip: SAINT PETERSBURG, FL 33710

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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: JENNIFER STRACICK ED 09/30/2009
Electronic Signature of Signing Officer or Director — Date