

2009 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
Aug 05, 2009
Secretary of State

DOCUMENT# 761105

Entity Name: PRISON REHABILITATIVE INDUSTRIES AND DIVERSIFIED ENTERPRISES, INC.**Current Principal Place of Business:**12425 28TH ST N.
STE 300
ST PETERSBURG, FL 33716 US**New Principal Place of Business:****Current Mailing Address:**12425 28TH ST N
STE 300
ST PETERSBURG, FL 33716 US**New Mailing Address:**12425 28TH ST N.
STE 300
ST PETERSBURG, FL 33716 US**FEI Number:** 59-2167018**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**LAFACE, RONALD C
101 EAST COLLEGE AVE
TALLAHASSEE, FL 32302 US**Name and Address of New Registered Agent:**BREWTON, WILBUR E
225 S. ADAMS ST.
SUITE 250
TALLAHASSEE, FL 32301 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: WILBUR E. BREWTON

08/05/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: CD () Delete
Name: REEVES, JAMES J
Address: 730 BAYFRONT PKWY STE. 4B
City-St-Zip: PENSACOLA, FL 32502

Title: VCD () Delete
Name: HANAS, RICHARD L
Address: 1200 DUDA TRAIL
City-St-Zip: OVIEDO, FL 32765 45

Title: TD () Delete
Name: HILL, WALTER B
Address: 611 N NEW WARRINGTON ROAD
City-St-Zip: PENSACOLA, FL 32506

Title: SD () Delete
Name: DRESSER, WILLIAM G
Address: 192 ST. GEORGE COURT
City-St-Zip: JACKSONVILLE BEACH, FL 32250

Title: P () Delete
Name: EDGEMON, JACK L
Address: 12425 28TH STREET N, STE 300
City-St-Zip: ST. PETERSBURG, FL 33716

Title: CFO () Delete
Name: RADANOVICH, PETAR J
Address: 12425 28TH STREET N, STE. 300
City-St-Zip: ST. PETERSBURG, FL 33716

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:

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: JACK L. EDGEMON

P

08/05/2009

Electronic Signature of Signing Officer or Director

Date