

2012 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

FILED
May 01, 2012
Secretary of State

DOCUMENT# N01000006745

Entity Name: LIFE CARE GLOBAL, INC.

Current Principal Place of Business:

411 S 18TH STREET
FORT PIERCE, FL 34950 US

New Principal Place of Business:

Current Mailing Address:

411 S 18TH STREET
FORT PIERCE, FL 34950 US

New Mailing Address:

FEI Number: 80-0020300

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BECKWITH, OPHELIA S PRES
411 S 18TH STREET
FORT PIERCE, FL 34950 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: OPHELIA S BECKWITH

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P
Name: BECKWITH, OPHELIA S
Address: 411 S 18TH STREET
City-St-Zip: FORT PIERCE, FL 34950

Title: S/T
Name: WILLIAMS, PHYLLIS
Address: 412 S. 18TH ST., APT B
City-St-Zip: FORT PIERCE, FL 34950 US

Title: D
Name: SUMMERS, AMANDA
Address: 164 MEDITERRANEAN BLVD N.
City-St-Zip: PORT ST LUCIE, FL 34952

Title: D
Name: GLADYS, SCHENCK
Address: 646 SW MUNJACK COVE
City-St-Zip: PORT ST LUCIE, FL 34952

Title: D
Name: MATHEWS-MOLEON, MONIQUE
Address: 3209 VIRGINIA AVE
City-St-Zip: FT PIERCE, FL 34981

Title: D
Name: JAMES, ELIZABETH
Address: 615 NE 22ND ST
City-St-Zip: MIAMI, FL 33137

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: OPHELIA S BEKWITH

P

05/01/2012

Electronic Signature of Signing Officer or Director

Date