

2007 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N02000007435

FILED
Oct 08, 2007
Secretary of State

Entity Name: THE SPOT FAMILY CENTER, INC.

Current Principal Place of Business:

5203 WEST HOMOSASSA TRAIL
LECANTO, FL 34461

New Principal Place of Business:

1315 US HWY41 NORTH
INVERNESS, FL 34450

Current Mailing Address:

5203 WEST HOMOSASSA TRAIL
LECANTO, FL 34461

New Mailing Address:

P.O.BOX 2046
LECANTO, FL 34460

FEI Number: 01-0732818 **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:

VISSICCHIO, EVELYN
11825 W. RIVERHAVEN DRIVE
HOMOSASSA, FL 34447 US

Name and Address of New Registered Agent:

VISSICCHIO, EVELYN
3470 N. STIRRUP DRIVE
BEVERLY HILLS, FL 34465 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: EVELYN VISSICCHIO

10/08/2007

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: VISSICCHIO, JOSEPH A
Address: 5203 WEST HOMOSASSA TRAIL
City-St-Zip: LECANTO, FL 34461

Title: VP () Delete
Name: BETTENCOURT, LARRY N
Address: 2090 ROUTE 68TH WEST
City-St-Zip: ZELIENOPLE, PA 16063

Title: S () Delete
Name: RANDETT, JOHN
Address: 1930 S. MOLANIE DRIVE
City-St-Zip: HOMOSASSA, FL 34448

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: VISSICCHIO, JOSEPH A
Address: 1315 US HWY 41 NORTH
City-St-Zip: INVERNESS, FL 34450

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

Title: S (X) Change () Addition
Name: PALLEJA, CARLOS
Address: 5096 W. GULF TO LAKE HWY LOT B
City-St-Zip: LECANTO, FL 34460

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: EVELYN VISSICCHIO

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10/08/2007

Electronic Signature of Signing Officer or Director

Date