

2005 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N03000004071

Entity Name: DIVINE CHARITIES, INC.

FILED
Mar 28, 2005
Secretary of State

Current Principal Place of Business:

2909 163RD AVE N.
CLEARWATER, FL 33760

New Principal Place of Business:

12950 58TH ST N, SUITE 1
CLEARWATER, FL 33760

Current Mailing Address:

2909 163RD AVE N.
CLEARWATER, FL 33760

New Mailing Address:

12950 58TH ST N, SUITE 1
CLEARWATER, FL 33760

FEI Number: 86-1062061 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)
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:

ERICKSON, BRENDA A
5646 LAGOON DRIVE
NEW PORT RICHEY, FL 34653 US

Name and Address of New Registered Agent:

HAWTHORNE, LYNNE M
12950 58TH ST N, SUITE 1
CLEARWATER, FL 33760 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: LYNNE M. HAWTHORNE

03/28/2005

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: ERICKSON, BRENDA A
Address: 5646 LAGOON DRIVE
City-St-Zip: NEW PORT RICHEY, FL 34653

Title: VD () Delete
Name: CATANESE, CATHERINE
Address: 2909 163RD AVE N.
City-St-Zip: CLEARWATER, FL 33760

Title: SD (X) Delete
Name: HAWTHORNE, LINNE M
Address: 15819 REDINGTON DRIVE
City-St-Zip: REDINGTON, FL 33708

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: HAWTHORNE, LYNNE M
Address: 12950 58TH ST N, SUITE 1
City-St-Zip: CLEARWATER, FL 33760

Title: VSTD (X) Change () Addition
Name: HAWTHORNE, WALTER J
Address: 15819 REDINGTON DR
City-St-Zip: REDINGTON BEACH, FL 33708

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

I hereby certify that the information supplied with this filing does not qualify for the 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 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: LYNNE M. HAWTHORNE

PD

03/28/2005

Electronic Signature of Signing Officer or Director

Date