

# **2010 NOT-FOR-PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# N03000005455

**FILED**  
**Oct 20, 2010**  
**Secretary of State**

**Entity Name:** AT RISK YOUTH GROUP HOMES, INC.

**Current Principal Place of Business:**

7530 NW 10 AVENUE  
MIAMI, FL 33150

**New Principal Place of Business:**

**Current Mailing Address:**

7530 NW 10 AVENUE  
MIAMI, FL 33150

**New Mailing Address:**

**FEI Number:** 51-0472565

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

MASON, TONA  
3130 SALINAS WAY  
MIRAMAR, FL 33025 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:** TONA MASON

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

**Title:** PD  
**Name:** GACHELIN, FLEURANT  
**Address:** 7530 NW 10 AVENUE  
**City-St-Zip:** MIAMI, FL 33150

**Title:** V  
**Name:** BIENAIME, STANLEY  
**Address:** 7530 NW 10 AVENUE  
**City-St-Zip:** MIAMI, FL 33150

**Title:** SD  
**Name:** DESROSIER, BERNADETTE  
**Address:** 7530 NW 10 AVENUE  
**City-St-Zip:** MIAMI, FL 33150

**Title:** TD  
**Name:** GACHELIN, MAGDALA  
**Address:** 7530 NW 10 AVENUE  
**City-St-Zip:** MIAMI, FL 33150

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:** FLEURANT GACHELIN

PD

10/20/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date