

# **2012 NOT-FOR-PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# N03000007633

**FILED**  
**Jun 14, 2012**  
**Secretary of State**

**Entity Name:** TREASURE COAST EMPLOYMENT SERVICES I, INC.

**Current Principal Place of Business:**

921 E HALL ST  
STUART, FL 34994

**New Principal Place of Business:**

**Current Mailing Address:**

921 E HALL ST  
STUART, FL 34994

**New Mailing Address:**

**FEI Number:** 20-0199612

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

GIPSON, CEPHAS L II  
921 E HALL ST  
STUART, FL 34994 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:** CEPHAS L. GIPSON 11

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

**Title:** D  
**Name:** GIPSON, CEPHAS L II  
**Address:** 921 E HALL ST  
**City-St-Zip:** STUART, FL 34994

**Title:** D  
**Name:** CHRISTIE, JAMES ALBERT  
**Address:** 915 HALL STREET  
**City-St-Zip:** STUART, FL 34994

**Title:** D  
**Name:** ROBINSON-CLARKE, OULA R  
**Address:** PO BOX 3335  
**City-St-Zip:** STUART, FL 34995

**Title:** D  
**Name:** SPEAKS, LOTUS K  
**Address:** 7678 SE KINGS WAY  
**City-St-Zip:** HOBE SOUND, FL 33455

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:** CEPHAS L. GIPSON 11

PRES

06/14/2012

Electronic Signature of Signing Officer or Director

Date