

2006 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N04000002456

FILED
Aug 15, 2006
Secretary of State

Entity Name: ASSISTANCE DOGS TRAINING AND EDUCATION CENTER, INC.

Current Principal Place of Business:

13777 NW GAINESVILLE RD.
REDDICK, FL 32686

New Principal Place of Business:

3711 SW 7TH AVENUE ROAD
OCALA, FL 34474

Current Mailing Address:

P.O. BOX 635
REDDICK, FL 32686

New Mailing Address:

3711 SW 7TH AVENUE ROAD
OCALA, FL 34474

FEI Number: **FEI Number Applied For ()** **FEI Number Not Applicable (X)** **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:

FULLAM, SHIRLEY
13777 NW GAINESVILLE RD.
REDDICK, FL 32686 US

Name and Address of New Registered Agent:

FULLAM, SHIRLEY
3711 SW 7TH AVENUE ROAD
OCALA, FL 34474 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: SHIRLEY FULLAM

08/15/2006

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: FULLAM, SHIRLEY
Address: P.O. BOX 635
City-St-Zip: REDDICK, FL 32686

Title: STD () Delete
Name: FULLAM, WILLIAM
Address: P.O. BOX 635
City-St-Zip: REDDICK, FL 32686

Title: D () Delete
Name: FULLAM, ELIZABETH
Address: P.O. BOX 635
City-St-Zip: REDDICK, FL 32686

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: FULLAM, SHIRLEY
Address: 3711 SW 7TH AVENUE ROAD
City-St-Zip: OCALA, FL 34474

Title: STD (X) Change () Addition
Name: FULLAM, WILLIAM
Address: 3711 SW 7TH AVENUE ROAD
City-St-Zip: OCALA, FL 34474

Title: D (X) Change () Addition
Name: FULLAM, ELIZABETH
Address: 3711 SW 7TH AVENUE ROAD
City-St-Zip: OCALA, FL 34474

I hereby certify that the information supplied with this filing does not qualify for the 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: SHIRLEY FULLAM

PD

08/15/2006

Electronic Signature of Signing Officer or Director

Date