## 2005 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

## DOCUMENT# N04000002530

FILED Nov 30, 2005 Secretary of State

Entity Name: THE ANGELS' ARCH - RECOVERY SOLUTIONS, INC.

Current Pri	incipal Place of Business:	New Princ	ipal Place of Business:
2225 AMELIA CIRCLE TALLAHASSEE, FL 32304			
Current Mailing Address:		New Mailing Address:	
2225 AMELIA CIRCLE TALLAHASSEE, FL 32304			
	20-0863104 FEI Number Applied For ( ) FEI Number Applied For ( ) FEI Number Applied For ( ) FEI Number State () FEI Number Applied For ( ) FEI Number Address of Current Registered Agent:	=	
KOELEMIJ, 2225 AMEL	KEVIN J	Name and	Address of New Registered Agent.
The above in the State	named entity submits this statement for the purpose of Florida.	of changing it	s registered office or registered agent, or both,
SIGNATURE: KEVIN JOHN KOELEMIJ  Electronic Signature of Registered Agent Date			
OFFICERS AND DIRECTORS:		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	PD ( ) Delete KOELEMIJ, KEVIN J 2225 AMELIA CIRCLE TALLAHASSEE, FL 32304	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition
Title: Name: Address: City-St-Zip:	VTD ( ) Delete INGRAM, KAREN R 3994 BREEZEE COURT TALLAHASSEE, FL 32303	Title: Name: Address: City-St-Zip:	VTD (X) Change ( ) Addition INGRAM, KAREN R C/O 2225 AMELIA CIRCLE TALLAHASSEE, FL 32304
Title: Name: Address: City-St-Zip:	VSD ( ) Delete COMPTOM, BRADLEY W 160 CRENSHAW DRIVE #5 TALLAHASSEE, FL 32310	Title: Name: Address: City-St-Zip:	VD (X) Change ( ) Addition COMPTOM, BRADLEY W C/0 2225 AMELIA CIRCLE TALLAHASSEE, FL 32304
Title: Name: Address: City-St-Zip:	()Delete	Title: Name: Address: City-St-Zip:	VD ( ) Change (X) Addition PORTER, KAREN C/O 2225 AMELIA CIRLCE TALLAHASSEE, FL 32304
Title: Name: Address: City-St-Zip:	( ) Delete	Title: Name: Address: City-St-Zip:	VD ( ) Change (X) Addition NICHOLAS, SCHUMM DEACON C/O 2225 AMELIA CIRCLE TALLAHASSEE, FL 32304
Title: Name: Address: City-St-Zip:	( ) Delete	Title: Name: Address: City-St-Zip:	VSD ( ) Change (X) Addition LAW, BRETT C/0 2225 AMELIA CIRCLE TALLAHASSEE, FL 32304

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: KEVIN JOHN KOELEMIJ PD 11/30/2005