

2006 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

FILED
Oct 19, 2006
Secretary of State

DOCUMENT# N04000005967

Entity Name: NIGHT RUNNERS MOBILE CRISIS SERVICES, INC.

Current Principal Place of Business:

3804 BURNS ROAD
PALM BEACH GARDENS, FL 33410

New Principal Place of Business:

Current Mailing Address:

3804 BURNS ROAD
PALM BEACH GARDENS, FL 33410

New Mailing Address:

FEI Number: 06-1724005 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:

HUDSON, LISE L ESQ.
515 NORTH FLAGLER DRIVE
SUITE 600
WEST PALM BEACH, FL 33401 US

Name and Address of New Registered Agent:

BOONE, RANDOLPH
500 N. CONGRESS AVE.
APT 193
WEST PALM BEACH, FL 33401 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: RANDOLPH BOONE

10/19/2006

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: ABRUEO, GILBERT
Address: 3804 BURNS ROAD
City-St-Zip: PALM BEACH GARDENS, FL 33410

Title: VP () Delete
Name: ABRUEO, EVELYN
Address: 3804 BURNS ROAD
City-St-Zip: PALM BEACH GARDENS, FL 33410

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: BC () Change (X) Addition
Name: BOONE, RANDOLPH PASTOR
Address: 500 N. CONGRESS AVE. APT 193
City-St-Zip: WEST PALM BEACH, FL 33401

Title: T () Change (X) Addition
Name: MAUCH, MIKE MR.
Address: 3804 BURNS ROAD
City-St-Zip: PALM BEACH GARDEN, FL 33410

Title: S () Change (X) Addition
Name: LUTHER, MIKE MR.
Address: P.O. BOX 221634
City-St-Zip: WEST PALM BEACH, FL 33422

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: RANDOLPH BOONE

BC

10/19/2006

Electronic Signature of Signing Officer or Director

Date