2007 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N05000001492

Jul 29, 2007 Secretary of State

Entity Name: SOUTH BEACH COMMUNITY OUTREACH, INC.

Current Principal Place of Business: New Principal Place of Business: 932 - 3RD AVE SOUTH 932 - 3RD AVE SOUTH JACKSONVILLE, FL 32250 JACKSONVILLE BEACH, FL 32250 **Current Mailing Address: New Mailing Address:** P O BOX 6354 JACKSONVILLE, FL 32236 FEI Number: 20-2199363 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: Name and Address of New Registered Agent: LUNDY, JUNE E 6536 ARROWROOT DR JACKSONVILLE, FL 32244 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: JUNE E. LUNDY Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete (X) Change () Addition QUAINTAINCE, KHARIS QUAINTANCE, KHARIS Name: Name: 333 E 2ND ST Address: 333 E 2ND ST Address: City-St-Zip: JACKSONVILLE, FL 32206 City-St-Zip: JACKSONVILLE, FL 32206 Title: Title: () Delete () Change () Addition MCNEIL, ALGIA Name: Name: Address: 200 S 10TH ST Address: City-St-Zip: JACKSONVILLE BEACH, FL 32250 City-St-Zip: Title: () Delete Title: () Change () Addition REID, RICHARD Name: Name: 2238 EAGLES NEST RD Address: Address: City-St-Zip: JACKSONVILLE, FL 32246 City-St-Zip: Title: () Delete Title: (X) Change () Addition Name: CAREY, CAROLYN Name: CAREY, CAROLYN Address: 833 KONG LAKE DR Address: 833 LONG LAKE DR City-St-Zip: JACKSONVILLE, FL 32225 City-St-Zip: JACKSONVILLE, FL 32225 Title: () Delete Title: () Change () Addition MARSHALL, ROSALIND R Name: Name: 10331 PALMETTO BAY RD Address: Address: City-St-Zip: JACKSONVILLE, FL 32218 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: KHARIS QUAINTANCE Ρ 07/29/2007