

2007 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N05000007163

FILED
Sep 28, 2007
Secretary of State

Entity Name: TEACHING THE AUTISTIC THROUGH LIVING AND LEARNING INC.

Current Principal Place of Business:

383 N.E. BAKER ROAD
STUART, FL 34994

New Principal Place of Business:

Current Mailing Address:

383 N.E. BAKER ROAD
STUART, FL 34994

New Mailing Address:

PO BOX 682
JENSEN BEACH, FL 34958

FEI Number: 20-3152812 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:

A1A REGISTERED AGENT INC.
92 SADBERRY ROAD
QUINCY, FL 32351 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: A1A REGISTERED AGENT INC

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: WELKER, NANCY C
Address: 4040 NE SUGARHILL AVENUE
City-St-Zip: JENSEN BEACH, FL 34957

Title: D () Delete
Name: WELKER, ROGER L JR
Address: 4040 NE SUGARHILL AVENUE
City-St-Zip: JENSEN BEACH, FL 34957

Title: D () Delete
Name: WADE, MABEL
Address: 9295 SW MICHELE DR.
City-St-Zip: STUART, FL 34997

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: () Change () Addition
Name:
Address:
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: NANCY C WELKER

DIR

09/28/2007

Electronic Signature of Signing Officer or Director

Date