

# **2010 NOT-FOR-PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# N06000008703

**FILED**  
**Sep 29, 2010**  
**Secretary of State**

**Entity Name:** ADULT ADVOCACY FOUNDATION, INC.

**Current Principal Place of Business:**

312 WEST LUTZ LAKE FERN ROAD  
TAMPA, FL 33548

**New Principal Place of Business:**

**Current Mailing Address:**

312 WEST LUTZ LAKE FERN ROAD  
TAMPA, FL 33548

**New Mailing Address:**

**FEI Number:** 22-3940742

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

SPIEGEL & UTRERA, P.A.  
1840 SW 22ND ST.  
4TH FLOOR  
MIAMI, FL 33145 US

**Name and Address of New Registered Agent:**

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:** TAMARA CRIBBEN

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

**Title:** PSTD  
**Name:** CRIBBEN, TAMARA L  
**Address:** 312 WEST LUTZ LAKE FERN ROAD  
**City-St-Zip:** TAMPA, FL 33548

**Title:** VPD  
**Name:** DICERB, LONA M  
**Address:** 312 WEST LUTZ LAKE FERN ROAD  
**City-St-Zip:** TAMPA, FL 33548

**Title:** D  
**Name:** OSMAND, HANNA PHD  
**Address:** 312 WEST LUTZ LAKE FERN ROAD  
**City-St-Zip:** TAMPA, FL 33548

**Title:** D  
**Name:** DICERB, JACQUIE  
**Address:** 312 W. LUTZ LAKE FERN ROAD  
**City-St-Zip:** TAMPA, FL 33548

I hereby 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 all other like empowered.

**SIGNATURE:** TAMARA CRIBBEN

PSTD

09/29/2010

Electronic Signature of Signing Officer or Director

Date