

2008 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N06000011725

FILED
Oct 31, 2008
Secretary of State

Entity Name: A COMMUNITY PROPERTY RECOVERY & A LIFE RECOVERY INCORPORATED

Current Principal Place of Business:

18520 NW 67TH AVENUE
108
MIAMI, FL 33015 US

New Principal Place of Business:

Current Mailing Address:

18520 NW 67TH AVENUE
108
MIAMI, FL 33015 US

New Mailing Address:

18520 NW 67TH AVENUE
108
MIAMI, FL 33015 US

FEI Number: 61-1468415 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
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:

GRINER, ANDRE
18520 NW 67 AVE 108
MIAMI, FL 33015 US

Name and Address of New Registered Agent:

GRINER, ANDRE
18520 NW 67 AVE
108
MIAMI, FL 33015 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: ANDRE GRINER

10/31/2008

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PRES () Delete
Name: FRANCIS, DEMETRIA MS
Address: 1313 NW 7TH AVE
City-St-Zip: SUNRISE, FL 33311

Title: TREA () Delete
Name: MARK, ANDERSON MR
Address: 6645 PEMBROKE ROAD
City-St-Zip: PEMBROKE PINES, FL 33023

Title: EMER () Delete
Name: RABAU, CHUCK MR
Address: 3121 BRANDY WINE DRIVE
City-St-Zip: TALLAHASSEE, FL 32308

Title: VP 2 () Delete
Name: GRINER, ANDRE MR
Address: 285 NW 44 STREET
City-St-Zip: MIAMI, FL 33127 US

Title: SEC () Delete
Name: GRINER, SAILEY MRS
Address: 285 NW 44TH ST
City-St-Zip: MIAMI, FL 33127

Title: VP1 () Delete
Name: FRANCIS, A. P.
Address: 18520 NW 67 AVE 108
City-St-Zip: MIAMI, FL 33015

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: ANDRE, GRINER PRES
Address: 285 NW 44 STREET
City-St-Zip: MIAMI, FL 33127

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

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

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: ANDRE GRINER

PRES

10/31/2008

Electronic Signature of Signing Officer or Director

Date