2007 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

FILED
Oct 11, 2007
Secretary of State

DOCUMENT# N06000011828

Entity Name: CASA DI FAMIGLIA, INC.

Current Principal Place of Business:

217 STONE ST.
DELAND, FL 32720

New Principal Place of Business:

Current Mailing Address:

217 STONE ST.
DELAND, FL 32720

New Mailing Address:

FEI Number: 20-5884771 **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:

BEGALLA, JOSEPH P
210 W. WASHINGTON ST.
DELAND, FL 32720 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: JOSEPH P. BEGALLA
Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: BEGALLA, JOSEPH P
Address: 210 W. WASHINGTON AVE.
City-St-Zip: DELAND, FL 32720

Title: V ( ) Delete
Name: NYCZ, MELISSA
Address: 2063 KILLINGER ST.
City-St-Zip: DELTONA, FL 32738

Title: S ( ) Delete
Name: KOUROUNIS, LISA
Address: 533 S. SHADOW LANE
City-St-Zip: DEBARRY, FL 32725

Title: T (X) Delete
Name: BATES, MELDA
Address: 3415 QUAIL DR.
City-St-Zip: DELTONA, FL 32738

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: T (X) Change ( ) Addition
Name: BATES, MELDA
Address: 3415 QUAIL DR.
City-St-Zip: DELTONA, FL 32738

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: JOSPEH P. BEGALLA PRES 10/11/2007
Electronic Signature of Signing Officer or Director — Date