

2009 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N07000011891

FILED
May 01, 2009
Secretary of State

Entity Name: POSITIVE CHANGE CENTER FOR LIVING INC.

Current Principal Place of Business:

5140 LAKE UNDERHILL RD.
ORLANDO, FL 32807

New Principal Place of Business:

Current Mailing Address:

5140 LAKE UNDERHILL RD.
ORLANDO, FL 32807

New Mailing Address:

FEI Number: 42-1749277

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SPIEGEL & UTRERA, P.A.
1840 SOUTHWEST 22ND STREET
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: DAPHNE RASHID

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: RASHID, FAREED M
Address: 1776 CLUB CT.
City-St-Zip: ORLANDO, FL 32807

Title: VPD () Delete
Name: RASHID, DAPHNE L
Address: 1776 CLUB CT.
City-St-Zip: ORLANDO, FL 32807

Title: SD () Delete
Name: BUJAS, SHIRLEY
Address: 5140 LAKE UNDERHILL RD.
City-St-Zip: ORLANDO, FL 32807

Title: T () Delete
Name: REED, DIANE
Address: 5140 LAKE UNDERHILL RD.
City-St-Zip: ORLANDO, FL 32807

Title: D () Delete
Name: HUNTER, DAVID A
Address: 5140 LAKE UNDERHILL RD.
City-St-Zip: ORLANDO, FL 32807

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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Name:
Address:
City-St-Zip:

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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: DAPHNE RASHID

VPD

05/01/2009

Electronic Signature of Signing Officer or Director

Date