

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

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FILED
Mar 06, 2011
Secretary of State

Entity Name: DIVINE RESTORATION, INC.

Current Principal Place of Business:

2135 FOREST BLVD
JACKSONVILLE, FL 32246

New Principal Place of Business:

Current Mailing Address:

2452 BLACKBEARD DR.
JACKSONVILLE, FL 32224

New Mailing Address:

FEI Number: 95-4374867

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MASCIA, PIERRE PASTOR
2452 BLACKBEARD DR
JACKSONVILLE, FL 32224 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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD
Name: MASCIA, PIERRE
Address: 2452 BLACKBEARD DR
City-St-Zip: JACKSONVILLE, FL 32224

Title: SD
Name: MASCIA, MARIE
Address: 2452 BLACKBEARD DR
City-St-Zip: JACKSONVILLE, FL 32224

Title: TD
Name: MASCIA, VIRGINIE
Address: 2452 BLACKBEARD DR
City-St-Zip: JACKSONVILLE, FL 32224

Title: APD
Name: MONTGOMERY, DANIEL
Address: 2452 BLACKBEARD DR.
City-St-Zip: JACKSONVILLE, FL 32224

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: PIERRE MASCIA

PD

03/06/2011

Electronic Signature of Signing Officer or Director

Date