

2011 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N09000002921

FILED
Aug 15, 2011
Secretary of State

Entity Name: NEW LIFE CENTERS FOR CHANGE, INC.

Current Principal Place of Business:

1985 SE GENA RD
PORT ST LUCIE, FL 34952

New Principal Place of Business:

Current Mailing Address:

1985 SE GENA RD
PORT ST LUCIE, FL 34952

New Mailing Address:

FEI Number: 26-4357347

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CAIRNS, MICHELE
1985 SE GENA RD
PORT ST LUCIE, FL 34952 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: MICHELE CAIRNS

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PRES
Name: CAIRNS, MICHELE L MS.
Address: 1985 SE GENA RD.
City-St-Zip: PORT ST LUCIE, FL 34952 US

Title: V.P
Name: EDWARDS, TOM A DR.
Address: 1985 SE GENA RD.
City-St-Zip: PORT ST. LUCIE, FL 34952 US

Title: SEC.
Name: MESMER, PATRICIA MRS.
Address: 5663 SE MITZI LN.
City-St-Zip: STUART, FL 34997 US

Title: TREA
Name: WEISGERBER, CASEY MR.
Address: 2955 MIDDLE RD.
City-St-Zip: FT. PIERCE, FL 34947 US

Title: B.M.
Name: PITTS, HAROLD MR.
Address: 1985 SE GENA RD.
City-St-Zip: PORT ST. LUCIE, FL 34952 US

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: MICHELE CAIRNS

PRES

08/15/2011

Electronic Signature of Signing Officer or Director

Date