

2010 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N09000008467

FILED
Oct 12, 2010
Secretary of State

Entity Name: FLAGLER COUNTY FAMILY ASSISTANCE CENTER, INC.

Current Principal Place of Business:

205 NORTH PINE STREET
BUNNELL, FL 32110

New Principal Place of Business:

Current Mailing Address:

POST OFFICE BOX 335
BUNNELL, FL 321100335

New Mailing Address:

FEI Number: 80-0487738

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

TURLEY, ALTON R
2309 S. DAYTONA AVENUE
FLAGLER BEACH, FL 32136 US

Name and Address of New Registered Agent:

KAPCAR, JOHN P SR.
21 RYKER LANE
PALM COAST, FL 32164 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: JOHN P. KAPCAR SR.

10/12/2010

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D
Name: TRAISTER, CARLA
Address: 4 BULOW WOODS CIRCLE
City-St-Zip: FLAGLER BEACH, FL 32136

Title: D
Name: WILLMAN, LEE
Address: 39 FLORIDA PARK DR N
City-St-Zip: PALM COAST, FL 32137

Title: C
Name: MORELEWICZ, JIM
Address: 85 SOLEE RD.
City-St-Zip: PALM COAST, FL 32137

Title: T
Name: THOMPSON, RICHARD W
Address: 46 BARRINGTON DR.
City-St-Zip: PALM COAST, FL 32137

Title: C
Name: BICKINGS, SUE
Address: 6 BLACK BEAR LN.
City-St-Zip: PALM COAST, FL 32137

Title: S
Name: KAPCAR, JOHN P SR.
Address: 21 RYKER LANE
City-St-Zip: PALM COAST, FL 32164

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: JOHN P. KAPCAR SR.

S

10/12/2010

Electronic Signature of Signing Officer or Director

Date