

2011 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N09000008547

FILED
Sep 16, 2011
Secretary of State

Entity Name: JOY OF KNOWLEDGE CENTER, INCORPORATED

Current Principal Place of Business:

466 LEAWOOD CIRCLE
NAPLES, FL 34104

New Principal Place of Business:

4100 CORPORATE SQUARE
124
NAPLES, FL 34104

Current Mailing Address:

466 LEAWOOD CIRCLE
NAPLES, FL 34104

New Mailing Address:

4100 CORPORATE SQUARE
124
NAPLES, FL 34104

FEI Number: 27-0890412

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

JACKREECE, PATRICIA M
466 LEAWOOD CIRCLE
NAPLES, FL 34104 US

Name and Address of New Registered Agent:

JACKREECE, PATRICIA M
4100 CORPORATE SQUARE
124
NAPLES, FL 34104 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: PATRICIA M JACKREECE

09/16/2011

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PRES
Name: JACKREECE, TELEMATE A PH.D.
Address: 4100 CORPORATE SQUARE SUITE 124
City-St-Zip: NAPLES, FL 34104 US

Title: SEC.
Name: JACKREECE, CARLOTTA M
Address: 4100 CORPORATE SQUARE SUITE 124
City-St-Zip: NAPLES, FL 34104 US

Title: TREA
Name: JACKREECE, TIMOTHY T
Address: 4100 CORPORATE SQUARE SUITE 124
City-St-Zip: NAPLES, FL 34104 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: TELEMATE A JACKREECE, PH.D.

PRES

09/16/2011

Electronic Signature of Signing Officer or Director

Date