## 2011 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

## DOCUMENT# N10000003529

FILED Nov 24, 2011 Secretary of State

Entity Name: MIRACLE HANDS CONSIGNMENT & THRIFT STORE, INC.

Current Principal Place of Business: New Principal Place of Business:

777 SOUTH HWY 27 121 W DIVISION STREET

SUITE B SUITE A CLERMONT, FL 34711 US SUITE A MINNEOLA, FL 34715

Current Mailing Address: New Mailing Address:

777 SOUTH HWY 27 121 W DIVISION STREET SUITE B SUITE A MINNEOLA, FL 34715

FEI Number: 80-0506898 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

CLARK, PATRICIA D 915 ARBOR HILL CR.

MINNEOLA, FL 34715 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 D. CLARK

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

Title: F

Name: CLARK, PATRICIA D Address: 915 ARBOR HILL CIRCLE City-St-Zip: MINNEOLA, FL 34715 US

Title: VF

Name: THOMAS, ASTON A
Address: 1728 PRESIDIO DRIVE
City-St-Zip: CLERMONT, FL 34711 US

Title: S

Name: CLARK, LARITA T Address: 204 W SUMMERHILL CT. City-St-Zip: MINNEOLA, FL 34715 US

Title: 1

Name: CLARK, LACY JR.
Address: 915 ARBOR HILL CIRCLE
City-St-Zip: MINNEOLA, FL 34715 US

Title: A

 Name:
 TELLADO, ADELINA

 Address:
 1211 HANCOCK RD.

 City-St-Zip:
 CLERMONT, FL 34711 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: PATRICIA D. CLARK P 11/24/2011