

2012 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N10000010144

FILED
Jan 12, 2012
Secretary of State

Entity Name: MY CHOICE ASSOCIATION INCORPORATED

Current Principal Place of Business:

711 OSCEOLA AVENUE
FORT PIERCE, FL 34982

New Principal Place of Business:

Current Mailing Address:

711 OSCEOLA AVENUE
FORT PIERCE, FL 34982

New Mailing Address:

FEI Number: 35-2393115

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HAYNES, DOROTHY
711 OSCEOLA AVENUE
FORT PIERCE, FL 34982 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: DOROTHY L. HAYNES

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D
Name: HAYNES, DOROTHY
Address: 711 OSCEOLA AVENUE
City-St-Zip: FORT PIERCE, FL 34982

Title: D
Name: JONES, TIJUANA
Address: 1717 BUSH AVENUE
City-St-Zip: LAKELAND, FL 33805

Title: D
Name: BROOME, TOMMIE
Address: 1020 NORTH 20TH STREET
City-St-Zip: CAMDEN, NJ 08105

Title: D
Name: SMITH, GREGORY
Address: 816 GASTON STREET B
City-St-Zip: ATLANTA, GA 30314

Title: D
Name: HARRIS, PEGGY
Address: 2702 AVENUE I
City-St-Zip: FORT PIERCE, FL 34947

Title: D
Name: AMOS, BARB
Address: 649 S.W. GRANADEER STREET
City-St-Zip: PORT SAINT LUCIE, FL 34983

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: DOROTHY L. HAYNES

PRES

01/12/2012

Electronic Signature of Signing Officer or Director

Date