

# **2012 NOT-FOR-PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# N10000010527

**FILED**  
**Jan 24, 2012**  
**Secretary of State**

**Entity Name:** PRESCRIPTIONS FOR HOPE, CORP.

**Current Principal Place of Business:**

1517 CAXAMBAS CT  
MARCO ISLAND, FL 34145

**New Principal Place of Business:**

**Current Mailing Address:**

1517 CAXAMBAS CT  
MARCO ISLAND, FL 34145

**New Mailing Address:**

**FEI Number:** 38-3818988

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

CRAIN, JOYCE  
1517 CAXAMBAS CT  
MARCO ISLAND, FL 34145 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:** JOYCE CRAIN

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

**Title:** VP  
**Name:** CLOUGH, SUSAN  
**Address:** 34438 CROSSLEY LANE  
**City-St-Zip:** MARCO ISLAND, FL 34145

**Title:** VP  
**Name:** PETRICKO, NANCY  
**Address:** 207 1/2 TIMBERYOKE DR.  
**City-St-Zip:** CORAOPOLIS, PA 15108

**Title:** VP  
**Name:** DAMEON, RUIZ  
**Address:** 274 SAN MARCO RD.  
**City-St-Zip:** MARCO ISLAND, FL 34145

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:** JOYCE CRAIN

MRS

01/24/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date