## 2009 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N40170

FILED Feb 13, 2009 Secretary of State

Entity Name: THE PARTNERSHIP FOR A DRUG-FREE FLORIDA, INC.

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

4552 BROOK DRIVE 43 ADMIRALS COURT WPB, FL 33417 US PBG, FL 33418 US

Current Mailing Address: New Mailing Address:

P O BOX 221345 43 ADMIRALS COURT

WEST PALM BEACH, FL 33422 US PALM BEACH GARDENS, FL 33418 US

FEI Number: 65-0230971 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

BUSH, KATHY

BUSH, KATHY

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4552 BROOK DRIVE 43 ADMIRALS COURT

WEST PALM BEACH, FL 33417 US PALM BEACH GARDENS, FL 33418 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: KATHY BUSH 02/13/2009

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Fitle: P ( ) Delete Title: P (X) Change ( ) Addition

Name: BUSH, KATHY Name: BUSH, KATHY
Address: 4552 BROOK DRIVE Address: 43 ADMIRALS CURT

City-St-Zip: WEST PALM BEACH, FL 33417 US City-St-Zip: PALM BEACH GARDENS, FL 33418 US

Title: CFO ( ) Delete Title: CFO (X) Change ( ) Addition

 Name:
 BUSH, KATHLEEN
 Name:
 BUSH, KATHY

 Address:
 P O BOX 221345
 Address:
 43 ADMIRALS COURT

Address: P O BOX 221345 Address: 43 ADMIRALS COURT

City-St-Zip: WEST PALM BEACH, FL 334221345 US City-St-Zip: PALM BEACH GARDEN, FL 33418 US

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: KATHY BUSH PRES 02/13/2009