## 2014 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N40700

FILED Oct 06, 2014 Secretary of State

Entity Name: MENTAL HEALTH COMMUNITY CENTERS, INC.

US

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

240-B S TUTTLE AVE SARASOTA, FL 34237 US

Current Mailing Address: New Mailing Address:

240-B S TUTTLE AVE SARASOTA, FL 34237

FEI Number: 65-0238526 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:

CHINAULT, KEVIN L
240 B SOUTH TUTTLE AVE
SARASOTA, FL 34237 US

ERNST, JENNIFER D
240 B SOUTH TUTTLE AVE
SARASOTA, FL 34237 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: JENNIFER D ERNST 10/06/2014

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

Title: TD

Name: TOMER, JOANN
Address: 4834 STONE RIDGE CR
City-St-Zip: SARASOTA, FL 34232

Title: VD

Name: LARUSSO, SOPHIA Address: 4888 TIVOLI AVE City-St-Zip: SARASOTA, FL 23235

Title: PD

 Name:
 FAWKS, DAVID

 Address:
 5811 VANDERPIPE RD

 City-St-Zip:
 SARASOTA, FL 34241

Title: ED

Name: EAGEN, CAROLYN
Address: 240 B SOUTH TUTTLE
City-St-Zip: SARASOTA, FL 34237

Title: VD

Name: CLINT, MALLARD Address: 5033 VIVIENDA WAY City-St-Zip: SARASOTA, FL 34235

Title: SD

Name: SHERYL, CORGAN
Address: 842 W DOUGLAS CT.
City-St-Zip: VENICE, FL 34293

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: CAROLYN EAGEN ED 10/06/2014