2006 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N93000004795

FILED Nov 13, 2006 Secretary of State

Entity Name: CHRISTIAN RETIREMENT CENTER OF MOUNT DORA, INC. **New Principal Place of Business: Current Principal Place of Business:** 301 WEST 13TH AVENUE MOUNT DORA, FL 32757 **Current Mailing Address: New Mailing Address:** 301 WEST 13TH AVENUE MOUNT DORA, FL 32757 FEI Number: 59-3208770 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: MOORE, JAMES E. 33540 WESLEY ROAD EUSTIS, FL 32736 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: JAMES E. MOORE Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition MOORE, JAMES E Name: Name: Address: 33540 WESLEY ROAD Address: City-St-Zip: EUSTIS, FL City-St-Zip: Title: SD () Delete Title: () Change () Addition Name: STULTS, DENNIS Name: Address: 550 E. LAKE ELBERT Address: City-St-Zip: WINTER HAVEN, FL City-St-Zip: Title: (X) Delete Title: () Change () Addition SUTTON, HAROLD Name: Name: 11208 LONGWOOD COURT Address: Address: City-St-Zip: BRADENTON, FL City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: JAMES E. MOORE PRES 11/13/2006