2013 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N94000001847

FILED Jun 12, 2013 Secretary of State

Entity Name: CONRADINA CHAPTER, F.N.P.S., INC.

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

2112 S HELEN ST 410 LEMON GROVE AVE

MELBOURNE, FL 32901 US WEST MELBOURNE, FL 32904 US

Current Mailing Address: New Mailing Address:

PO BOX 1543

MELBOURNE, FL 329021543 US

FEI Number: 59-3251333 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:

DONALDSON, CAMERON VALENCIA, SUZANNE 2112 S HELEN ST 410 LEMON GROVE AVE

MELBOURNE, FL 32901 US WEST MELBOURNE, FL 32904 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: SUZANNE VALENCIA 06/12/2013

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: SD

Name: STEUART, MARTHA
Address: 996 NEVADA DRIVE NE
City-St-Zip: PALM BAY, FL 32907

Title: VD

 Name:
 HEBERT, CAROL

 Address:
 2400 WASHINGTON ST

 City-St-Zip:
 WEST MELBOURNE, FL
 32904

Title: PD

Name: DOLAN, SHARON Address: 2395 MAPLE STREET

City-St-Zip: WEST MELBOURNE, FL 32904

Title: TD

Name: VALENCIA, SUZANNE
Address: 410 LEMON GROVE AVE
City-St-Zip: WEST MELBOURNE, FL 32904

Title: D

Name: CRAWFORD, CHRISTINE Address: 2143 ROCKLEDGE DRIVE City-St-Zip: ROCKLEDGE, FL 32955

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: SUZANNE VALENCIA PRES 06/12/2013