## 2011 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

## DOCUMENT# N94000005047

FILED Apr 20, 2011 Secretary of State

Entity Name: LIFE, EDUCATION AND COUNSELING CENTER OF SOUTHWEST FLORIDA, INC.

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

4544 CORONADO PKWY CAPE CORAL, FL 33904 US

Current Mailing Address: New Mailing Address:

36 NEIBA CT FORT MYERS, FL 33912

FEI Number: 65-0539869 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:

SEAMAN, PHYLLIS J SEC'Y 36 NEIBA STREET FT MYERS, FL 33912 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.

in the state of Florida.

SIGNATURE: PHYLLIS J. SEAMAN

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

Title: MBD

Name: MORROW, WILLIAM
Address: 536 VALMAR DR
City-St-Zip: FT MYERS, FL 33919

Title: MBD

Name: DUTTON, RICHARD
Address: 9259 BRENO DR.
City-St-Zip: CAPE CORAL, FL 33913

Title: ATD

 Name:
 SEAMAN, PHYLLIS J

 Address:
 36 NEIBA COURT

 City-St-Zip:
 FT. MYERS, FL 33912

Title: BMD

 Name:
 HARRIS, NORMA

 Address:
 5260 S. LANDINGS DR.

 City-St-Zip:
 FT. MYERS, FL 33919

Title: BMD

Name: WHEELER, WILSON
Address: 5900 JEFFERY LANE
City-St-Zip: FT MYERS, FL 33907

Title: MBD

Name: VERWEST, LEANNA

Address: 6938 OLD WHISKEY CREEK DRIVE

City-St-Zip: FT. MYERS, FL 33919

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: PHYLLIS J. SEAMAN SEC. 04/20/2011