## 2005 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

## DOCUMENT# N95000004505

Entity Name: POSITIVE ALTERNATIVES, INC.

FILED Oct 28, 2005 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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1230 PEACHTREE STREET, NE 315 FOURTEENTH ST., NW

STE 1150 SUITE 2150

ATLANTA, GA 30309 US ATLANTA, GA 30318 US

Current Mailing Address: New Mailing Address:

1230 PEACHTREE STREET, NE 315 FOURTEENTH ST.,NW STE 1150 STE 2150

ATLANTA, GA 30309 US ATLANTA, GA 30318 US

FEI Number: 65-0658420 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X)

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:

STARKE, LEONARDO D MCNEIL, RYAN

3340 MCDONALD STREET 7889 SADDLEBROOK DR.
MIAMI, FL 33133 US PORT ST. LUCIE, FL 34986 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: RYAN MCNEIL 10/28/2005

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DVT () Delete Title: () Change () Addition

 Name:
 HAYWOOD, ROSE
 Name:

 Address:
 7889 SADDLEBROOK DR.
 Address:

 City-St-Zip:
 PORT ST LUCIE, FL 34986
 City-St-Zip:

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

Name: MCNEIL, RYAN D Name: MCNEIL, RYAN D

Address: 8030 DERBYSHIRE CT. Address: 315 FOURTEENTH ST., NW SUITE 3000

City-St-Zip: DULUTH, GA 30097 City-St-Zip: ATLANTA, GA 30318

Title: DS ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 STARKE, LEONARDO
 Name:

 Address:
 3340 MCDONALD STREET
 Address:

 City-St-Zip:
 MIAMI, FL 33133
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: RYAN MCNEIL DP 10/28/2005