2006 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

SIGNATURE: Day M. Tunkelman
SIGNATURE and TYPEO OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FILED DOCUMENT # N97000000386 POLK COUNTY FAMILY CAREGIVERS, INC. 06 DEC 26 AM 8: 34 SEChe LANT OF STATE Principal Place of Business Mailing Address REINSTATIEMEN 1232 E. MAGNOLIA ST 1232 E. MAGNOLIA ST LAKELAND, FL 33801 LAKELAND, FL 33801 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. /10022006 REIN-NP CR2E099 (11/05) City & State City & State 4. FEI Number 59-3425655 Applied For Not Applicable Zin Country Zip Country \$8.75 Additional 5. Certificate of Status Desired X Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent FINKELMAN SECTY MERSCH, HENRY Street Address (P.O. Box Number is Not Acceptable) 1232 E. MAGNOLIA ST LAKELAND, FL 33801 1232 E. Magnolia St. 8. 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. I am familiar with, and accept the obligations of registered agent. 12-10-06 DATE FILE NOW!!! FEE IS \$236.25 Make check payable to After January 1, 2007, Fee will be \$297.50 Florida Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. 11. D ☐ Change TITLE Delete TITLE ☐ Addition MERSCH, HENRY NAME NAME 200092776812 12/26/06--01041--017 **24 1232 E. MAGNOLIA ST STREET ADDRESS STREET ADDRESS CITY-ST-ZIP LAKELAND, FL 33801 CITY-ST-ZIP Change D TITLE TITLE **Delete** Addition O'REILLY, ALICE NAME NAME STREET ADDRESS 1232 E MAGNOLIA ST STREET ADDRESS CITY-ST-ZIP LAKELAND, FL 33801 CITY-ST-ZIP D beorge Laws 511 Recker Hury. auburndale, 72 33823-4037 Addition TITLE Delete TITLE KING, DR SUSAN R-NAME **402 ELDERBERRY CT** STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CELEBRATION, FL 34747 CITY-ST-7IP ☐ Change ☐ Delete TITLE Addition TITLE DICKTER, RICHARD NAME NAME STREET ADDRESS 3142 WEST HENDERSON CIR STREET ADDRESS CITY-ST-ZIP LAKELAND, FL 33803 CITY-ST-ZIP ☐ Delete TITLE Change ☐ Addition TITLE ANDREW, BILL NAME NAME STREET ADDRESS 1818 FIFTH ST. STREET ADDRESS CITY-ST-ZIP WINTER HAVEN, FL 33880 CITY-ST-ZIP Bay Finkelman 4228 Hartridge Jane Jakeland, Fl 33813-2192 ☐ Change Addition TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.