2010 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N98000001015

FILED Nov 10, 2010 Secretary of State

Entity Name: HERITAGE FAMILY PRESERVATION CENTER, INC.

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

4823 SILVER STAR ROAD SUITE 160

ORLANDO, FL 32808 US

Current Mailing Address: New Mailing Address:

4823 SILVER STAR ROAD SUITE 160 ORLANDO, FL 32808 US

FEI Number: 59-3447088 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:

POOLE, GERTRUDE S 4908 CENTER LANE ORLANDO, FL 32808 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: GERTRUDE S. POOLE

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Γitle: COB

Name: POOLE, GERTRUDE S Address: 4908 CENTER LANE City-St-Zip: ORLANDO, FL 32808

Title: VC

Name: WRIGHT, CASSANDRA S Address: 703 S. WILSON AVENUE City-St-Zip: COCOA, FL 32922

Title:

Name: POOLE, WILLIE C REV Address: 4908 CENTER LANE City-St-Zip: ORLANDO, FL 32808

Title: [

 Name:
 DANIEL, WILLIE P

 Address:
 7443 BAY

 City-St-Zip:
 SANFORD, FL 32771

Title: D

Name: RIGELL, DEBORAH
Address: 1513 N. OLEANDER AVENUE
City-St-Zip: SANFORD, FL 32771

Title: [

Name: RIGELL, CRANFORD T ELDER
Address: 1513 N. OLEANDER AVENUE
City-St-Zip: SANFORD, FL 32771

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: GERTRUDE S. POOLE DR 11/10/2010