

2007 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N99000001894

FILED
Apr 20, 2007
Secretary of State

Entity Name: LIFEHOUSE OF NAPLES, INC.

Current Principal Place of Business:

2144 SHADOWLAWN DRIVE
NAPLES, FL 34112

New Principal Place of Business:

2140 SHADOWLAWN DRIVE
NAPLES, FL 34112

Current Mailing Address:

2144 SHADOWLAWN DRIVE
NAPLES, FL 34112

New Mailing Address:

2132 SHADOWLAWN DRIVE
NAPLES, FL 34112

FEI Number: 59-3572975 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:

KNESS, CORY R
2144 SHADOWLAWN DRIVE
NAPLES, FL 34112 US

Name and Address of New Registered Agent:

HOLLINGSWORTH, RICK
2155 PINWOODS CIR
NAPLES, FL 34105 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: RICK HOLLINGSWORTH

04/20/2007

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: KNESS, CORY R
Address: 2144 SHADOWLAWN DR.
City-St-Zip: NAPLES, FL 34112

Title: VPT (X) Delete
Name: DELONG, ANDREW
Address: 583 ROMA CT
City-St-Zip: NAPLES, FL 34108

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D/T (X) Change () Addition
Name: DELONG, ANDREW
Address: 583 ROMA CT
City-St-Zip: NAPLES, FL 34110

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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: ANDREW DELONG

D/T

04/20/2007

Electronic Signature of Signing Officer or Director

Date