

# 2006 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N99000007234

FILED  
Jan 03, 2006  
Secretary of State

**Entity Name:** THE STAFF OF LIFE OF TAMPA BAY, INC

**Current Principal Place of Business:**

4205 E. RICHMERE STREET  
TAMPA, FL 33617

**New Principal Place of Business:**

**Current Mailing Address:**

4205 E. RICHMERE STREET  
TAMPA, FL 33617

**New Mailing Address:**

P. O. BOX 17742  
TAMPA, FL 33682

**FEI Number:** 59-3611276      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**  
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:**

KELLY, MICHELLE  
4205 E. RICHMERE STREET  
TAMPA, FL 33617      US

**Name and Address of New Registered Agent:**

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: MICHELLE KELLY

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD      ( ) Delete  
Name: KELLY, MICHELLE  
Address: 4205 E. RICHMERE STREET  
City-St-Zip: TAMPA, FL 33617

Title: T      ( ) Delete  
Name: HAYLEY, GRAY  
Address: 3605 E. SHADOW LAWN AVE.  
City-St-Zip: TAMPA, FL 33610

Title: CM      ( ) Delete  
Name: NEGRON, YESMIN L  
Address: 2013 STUART ST.  
City-St-Zip: TAMPA, FL 33605

Title: D      ( ) Delete  
Name: SEXIL, JANICE GREY  
Address: 1308 FOXBORD DR.  
City-St-Zip: BRANDON, FL 33571

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

Title: CM      (X) Change ( ) Addition  
Name: NEGRON, YESMIN L  
Address: 745 W. GREEN ST APT. 1B  
City-St-Zip: TAMPA, FL 33607

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: YESMIN L. NEGRON

CM

01/03/2006

Electronic Signature of Signing Officer or Director

Date