2006 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P02000123595

Entity Name: SENIOR SERVICES NETWORK OF FLORIDA, INC

FILED Dec 13, 2006 Secretary of State

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

9023 COMMERCIAL WAY WEEKI WACHEE, FL 34613 US

Current Mailing Address: New Mailing Address:

9023 COMMERCIAL WAY WEEKI WACHEE, FL 34613 US

FEI Number: 20-0003770 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

BALL, LYNETTE M
14584 LINDEN DR
SPRING HILL, FL 34609 US

BALL, LYNETTE M
352 TRIANA ST
SPRING HILL, FL 34609 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: LYNETTE M. BALL 12/13/2006

Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

 Name:
 BALL, LYNETTE M
 Name:
 BALL, LYNETTE M

 Address:
 14584 LINDEN DR
 Address:
 352 TRIANA ST

City-St-Zip: SPRING HILL, FL 34609 US City-St-Zip: SPRING HILL, FL 34609 US

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

 Name:
 BALL, ROGER M
 Name:
 BALL, ROGER M

 Address:
 14584 LINDEN DR
 Address:
 352 TRIANA ST

City-St-Zip: SPRING HILL, FL 34609 US City-St-Zip: SPRING HILL, FL 34609 US

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: LYNETTE M. BALL P 12/13/2006