2008 FOR PROFIT CORPORATION REINSTATEMENT

FILED
Mar 04, 2008
Secretary of State

DOCUMENT# P04000139405

Entity Name: NEVAEH COMMUNITY CARE INC.

Current Principal Place of Business:

5885 EDENFIELD RD
JACKSONVILLE, FL 32277

New Principal Place of Business:

3101 UNIVERSITY BLVD. S.
205
JACKSONVILLE, FL 32216

Current Mailing Address:

5885 EDENFIELD RD
JACKSONVILLE, FL 32277

New Mailing Address:

3101 UNIVERSITY BLVD. S.
205
JACKSONVILLE, FL 32216

FEI Number: 20-1661148 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MITCHELL, LISA
5885 EDENFIELD RD
JACKSONVILLE, FL 32277 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: LISA MITCHELL
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:

Title: P/D ( ) Delete
Name: MITCHELL, LISA
Address: 5885 EDENFIELD RD
City-St-Zip: JACKSONVILLE, FL 32277

Title: T/S ( ) Delete
Name: MITCHELL, LISA
Address: 5885 EDENFIELD RD
City-St-Zip: JACKSONVILLE, FL 32277

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

I hereby certify that the information supplied with this filing does not qualify 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: LISA MITCHELL OWNE 03/04/2008
Electronic Signature of Signing Officer or Director Date