2010 FOR PROFIT CORPORATION REINSTATEMENT

FILED
Dec 14, 2010
Secretary of State

DOCUMENT# P09000011713

Entity Name: A TOUCH OF CLASS ADULT CARE, INC.

Current Principal Place of Business:

537 SW WHITMORE DR
PORT ST LUCIE, FL 34984

New Principal Place of Business:

537 SW WHITMORE DR
PORT ST LUCIE, FL 34984 US

Current Mailing Address:

537 SW WHITMORE DR
PORT ST LUCIE, FL 34984

New Mailing Address:

537 SW WHITMORE DR
PORT ST LUCIE, FL 34984 US

FEI Number: 32-0273838 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

DAVIS, CHRISTINE
537 SW WHITMORE DR
PORT ST LUCIE, FL 34984 US

Name and Address of New Registered Agent:

O HEARN, JAMES J
2466 NE 17 COURT
JENSEN BEACH, FL 34957 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: JAMES J HEARN 12/14/2010
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: P
Name: DAVIS, CHRISTINE
Address: 537 SW WHITMORE DR
City-St-Zip: PORT ST LUCIE, FL 34984 US

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

SIGNATURE: CHRISTINE DAVIS P 12/14/2010
Electronic Signature of Signing Officer or Director Date