2012 FOR PROFIT CORPORATION REINSTATEMENT

FILED
Apr 03, 2012
Secretary of State

DOCUMENT# P10000029337

Entity Name: AUTUMN BREEZE ASSISTED LIVING FACILITY (ALF) INC.

Current Principal Place of Business:

904 LAKE MARTHA DRIVE NE
WINTER HAVEN, FL 33881

New Principal Place of Business:

Current Mailing Address:

904 LAKE MARTHA DRIVE NE
WINTER HAVEN, FL 33881

New Mailing Address:

FEI Number: 80-0582050 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MILHOMME, JEAN A
904 LAKE MARTHA DRIVE NE
WINTER HAVEN, FL 33881 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: JEAN A MILHOMME

Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: P
Name: POSSIBLE, MARIE S
Address: 904 LAKE MARTHA DRIVE NE
City-St-Zip: WINTER HAVEN, FL 33881

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: MARIE SUZE POSSIBLE P 04/03/2012

Electronic Signature of Signing Officer or Director — Date