## 2013 FOR PROFIT CORPORATION REINSTATEMENT

## DOCUMENT# P11000018408

**FILED** Mar 05, 2013 Secretary of State

Entity Name: SPECIAL NEEDS FOR CHILDREN OF KATHLEEN ROBERTS ROSSIN, INC

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

303 NORTH VILLAGE STREET 52 RILEY RD CELEBRATION, FL 34747

367

CELEBRATION, FL 34747 US

**Current Mailing Address: New Mailing Address:** 

303 NORTH VILLAGE STREET 52 RILEY RD CELEBRATION, FL 34747

US

CELEBRATION, FL 34747 US

FEI Number: FEI Number Applied For (X) FEI Number Not Applicable ( ) Certificate of Status Desired (X)

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

GAMBLE, KIETTA M GAMBLE, KIETTA M 8740 CRÉSTGATE CIRCLE 8740 CRÉSTGATE CIR ORLANDO, FL 32819 ORLANDO, FL 32819 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: KIETTA M GAMBLE 03/05/2013

> Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

Title:

ROSSIN, KATHLEEN R Name:

52 RILEY RD Address:

City-St-Zip: CELEBRATION, FL 34747 US

Title: VΡ

GAMBLE, KIETTA M Name: P O BOX 692286 Address: ORLANDO, FL 32869 US City-St-Zip:

Title: SEC

GAMBLE, KIETTA Name: P O BOX 692286 Address: City-St-Zip: ORLANDO, FL 32869

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.

Ρ SIGNATURE: KATHLEEN ROSSIN 03/05/2013