## 2018 FLORIDA NOT FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N13000008618

Entity Name: PROVIDER'S OF FREEDOM INC.

Entity Name. PROVIDER 3 OF PREEDOM IN

**Current Principal Place of Business:** 

1711 SW STARMAN AVE PORT ST LUCIE, FL 34953

**Current Mailing Address:** 

1711 SW STARMAN AVE PORT ST LUCIE, FL 34953

FEI Number: 47-1063917 Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

WILKERSON , RANDOLPH SCOTT 13302 WINDING OAKS BLVD SUITE A TAMPA, FL 33612 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: RANDOLPH WILKERSON 10/25/2018

Electronic Signature of Registered Agent Date

Officer/Director Detail:

Title PD Title CHAIRMAN, CO PRESIDENT

Name WILKERSON, RANDOLPH Name MCGEEOCH, JAMES

Address 1711 SW STARMAN AVE Address 31 DOCK AVE

City-State-Zip: PORT ST LUCIE FL 34953 City-State-Zip: WARETOWN NJ 08758

Title VP

Name WILLIAMS, HAROLD
Address 249 WAINWRIGHT ST
City-State-Zip: FORKED RIVER NJ 08731

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

SIGNATURE: RANDOLPH WILKERSON

Electronic Signature of Signing Officer/Director Detail

**PRESIDENT** 

10/25/2018

FILED Oct 25, 2018

**Secretary of State** 

CR2785295246

Date