

2005 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

FILED
Nov 07, 2005
Secretary of State

DOCUMENT# N00000003858

Entity Name: BESSIE PERRY GARRETT FOUNDATION INC.

Current Principal Place of Business:

10275 COLLINS AVE
SUITE 817
BAY HARBOR ISLAND, FL 33154

New Principal Place of Business:

100 KINGS POINT DRIVE
SUITE 1417
SUNNY ISLES BEACH, FL 33160 US

Current Mailing Address:

10275 COLLINS AVE
SUITE 817
BAY HARBOR ISLAND, FL 33154

New Mailing Address:

100 KINGS POINT DRIVE
SUITE 1417
SUNNY ISLES BEACH, FL 33160 US

FEI Number: 65-1016314 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

GARRETT, BESSIE P
10275 COLLINS AVENUE
BAY HARBOR ISLAND, FL 33154 US

Name and Address of New Registered Agent:

GARRETT, BESSIE P
100 KINGS POINT DRIVE
SUITE 1417
SUNNY ISLES BEACH, FL 33160 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: BESSIE PERRY GARRETT

11/07/2005

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: GARRETT, BESSIE PERRY
Address: 1130 100TH STREET #1
City-St-Zip: BAY HARBOR ISLAND, FL 33154

Title: VPD () Delete
Name: EVANS, ANTHONY
Address: 1130 100TH STREET #1
City-St-Zip: BAY HARBOR ISLAND, FL 33154

Title: SD () Delete
Name: JACKSON, YVONNE
Address: 1650 NW 57 ST.
City-St-Zip: MIAMI, FL 33142

Title: TD () Delete
Name: RUPP, STEPHANIE
Address: 7103 S.W. 115 PLACE #G
City-St-Zip: MIAMI, FL 33173

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: GARRETT, BESSIE PERRY
Address: 100 KINGS POINT DRIVE SUITE 1417
City-St-Zip: SUNNY ISLES BEACH, FL 33160 US

Title: VPD (X) Change () Addition
Name: EVANS, ANTHONY
Address: 100 KINGS POINT DRIVE SUITE 1417
City-St-Zip: SUNNY ISLES BEACH, FL 33160 US

Title: SD (X) Change () Addition
Name: WILLIAMS, DUANE
Address: 1823 SHADOW CREEK ROAD
City-St-Zip: GREEN ACRES, FL 33413 US

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

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: STEPHANIE RUPP

TD

11/07/2005

Electronic Signature of Signing Officer or Director

Date