2005 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N02000006074

Entity Name: FLORIDA NOW EDUCATION FUND INCORPORATED

FILED Jul 06, 2005 Secretary of State

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

21105 SE 144TH LANE 2600 N. FLAGLER DR. UMATILLA, FL 32784 US

207

WEST PALM BEACH, FL 33407 US

Current Mailing Address: New Mailing Address:

21105 SE 144TH LANE C/O HERMAN, 2600 N. FLAGLER DR. UMATILLA, FL 32784 US

WEST PALM BEACH, FL 33407 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:

SLUTIAK, DONNA M HERMAN, SHIRLEY Y 21105 SE 144TH LANE 2600 N. FLAGLER DR.

UMATILLA, FL 32784 US 207

WEST PALM BEACH, FL 33407 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: SHIRLEY Y. HERMAN 07/06/2005

> Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change () Addition () Delete KELLY, KATHERINE POLLOCK, CLARICE Name: Name:

160 ROYAL PALM WAY Address: 1965 S. OCEAN DR., APT S-17 Address: City-St-Zip: PALM BEACH, FL 33480 US City-St-Zip: HALLANDALE, FL 33009 US

(X) Change () Addition Title: () Delete Title: TREA

ANDRE, NATALIE Name: HERMAN, SHIRLEY Y Name: Address: 14782 WOOD LODGE LANE Address: 2600 N. FLAGLER DR. #207 City-St-Zip: DELRAY BEACH, FL 33484 US City-St-Zip: WEST PALM BEACH, FL 33407 US

Title: () Delete Title: (X) Change () Addition SLUTIAK, DONNA M SLUTIAK, DONNA M Name: Name:

21105 SE 144TH LANE 21105 SE 144TH LANE Address: Address: City-St-Zip: UMATILLA, FL 32784 US City-St-Zip: UMATILLA, FL 32784 US

() Delete (X) Change () Addition Title: Title: SECT MIKLOWITZ, LINDA Name: Name: WEEKS, SANDRA

2542 ARTHUR'S COURT 9209 SEMINOLE BLVD. #177 Address: Address: City-St-Zip: TALLAHASSEE, FL 32301 US City-St-Zip: SEMINOLE, FL 33772 US

Title: () Delete Title: (X) Change () Addition

BROWNE, KIMBERLY COHEN, JENNIFER Name: Name: 3002 NW 51ST ST. DRIVE 2271 LERYL AVE. Address: Address:

NORTH PORT ESTATE, FL 34286 US City-St-Zip: GAINESVILLE, FL 32606 US City-St-Zip:

Title: () Delete Title: (X) Change () Addition

MCCAFFREY, JESSICA WALL, HELEN Name: Name: Address: 6066 113 AVE N Address: 5633 DUKE RD.

PINELLAS PARK, FL 33782 US JACKSONVILLE, FL 32207 US City-St-Zip: 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: SHIRLEY Y. HERMAN **TREA** 07/06/2005

Electronic Signature of Signing Officer or Director

Date