2006 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N95000005442

FILED Oct 10, 2006 Secretary of State

Entity Name: ASSOCIATION FOR ABUSED WOMEN & CHILDREN, INC.

Current P	rincipal Place of Busi	ness:	New Prince	cipal Place of Business:
7110 S DI WEST PA	XIE HWY LM BEACH, FL 33405	US		
Current N	lailing Address:		New Mail	ing Address:
7110 S DI WEST PA	XIE HWY LM BEACH, FL 33405	US		
n accordan		S., the corporation did not rece		
1760 CAR	IAN, HARRIETTE AMBOLA ROAD LM BEACH, FL 33406	US		
The above	named entity submits t	his statement for the nurne	ss of changing	:ta ua miata wa di affi a a u wa miata wa di awa uti awa ba et
	e of Florida.	nis statement for the purpo	ise of changing	its registered office or registered agent, or both
n the Stat			se of changing	its registered office of registered agent, of both
n the Stat	e of Florida. RE: <u>HARRIETTE TIMM</u>		se or changing	Date
n the Stat	e of Florida. RE: <u>HARRIETTE TIMM</u>	1ERMAN		
n the Stat	e of Florida. RE: HARRIETTE TIMM Electronic Signat	1ERMAN		Date
n the Stati SIGNATU DFFICER Title: Jame: Address:	e of Florida. RE: HARRIETTE TIMM Electronic Signat S AND DIRECTORS: TD () Delete ASHLEY, NORMA 908 S LAKE DRIVE	1ERMAN	ADDITION Title: Name: Address:	Date NS/CHANGES TO OFFICERS AND DIRECTO
n the Stati BIGNATU DFFICER Title: Idame: Iddress: City-St-Zip: Title: Idame: Iddress:	e of Florida. RE: HARRIETTE TIMM Electronic Signat S AND DIRECTORS: TD () Delete ASHLEY, NORMA 908 S LAKE DRIVE LANTANA, FL SD () Delete HARDAGE, DR NELL 138 JFK DRIVE	1ERMAN	ADDITION Title: Name: Address: City-St-Zip: Title: Name: Address:	Date NS/CHANGES TO OFFICERS AND DIRECTO () Change () Addition PD (X) Change () Addition HARDAGE, DR NELL 138 JFK DRIVE

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: MERRI FENDER DIR 10/10/2006