

# 2009 FOR PROFIT CORPORATION REINSTATEMENT

**FILED**  
**Apr 29, 2009**  
**Secretary of State**

DOCUMENT# P99000021755

Entity Name: FOUNDATION I, INC.

**Current Principal Place of Business:**

5601 COPORATE WAY SUITE 404  
WEST PALM BEACH, FL 33407 US

**New Principal Place of Business:**

2801 PGA BLVD, SUITE 220  
PALM BEACH GARDENS, FL 33410 US

**Current Mailing Address:**

5601 COPORATE WAY SUITE 404  
WEST PALM BEACH, FL 33407 US

**New Mailing Address:**

2801 PGA BLVD, SUITE 220  
PALM BEACH GARDENS, FL 33410 US

FEI Number: 65-0905580

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

WAXMAN, BRIAN K ESQ.  
5601 CORPORATE WAY SUITE 404  
WEST PALM BEACH, FL 33407 US

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

WAXMAN, BRIAN K ESQ.  
2801 PGA BLVD, SUITE 220  
PALM BEACH GARDENS, FL 33410 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: MALI LIBERTY

04/29/2009

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: DPST ( ) Delete  
Name: WAXMAN, BRIAN K ESQ.  
Address: 5601 CORPORATE WAY, SUITE 404  
City-St-Zip: WEST PALM BEACH, FL 33407

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: DPST (X) Change ( ) Addition  
Name: WAXMAN, BRIAN K ESQ.  
Address: 2801 PGA BLVD, SUITE 220  
City-St-Zip: PALM BEACH GARDENS, FL 33410

Title: AGEN ( ) Change (X) Addition  
Name: LIBERTY, MALI  
Address: 2801 PGA BLVD, SUITE 220  
City-St-Zip: PALM BEACH GARDENS, FL 33410

I hereby certify that the information supplied with this filing does not qualify 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: BRIAN K WAXMAN

DPST

04/29/2009

Electronic Signature of Signing Officer or Director

Date