

# 2008 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# 704323

FILED  
Oct 10, 2008  
Secretary of State

**Entity Name:** NATIONAL PARKINSON FOUNDATION, INC.

**Current Principal Place of Business:**

1501 N.W. 9TH AVENUE  
MIAMI, FL 331361494 US

**New Principal Place of Business:**

**Current Mailing Address:**

1501 N.W. 9TH AVENUE  
MIAMI, FL 331361494 US

**New Mailing Address:**

**FEI Number:** 59-0968031      **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:**

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

CORPORATE CREATIONS NETWORK INC.  
11380 PROSPERITY FARMS ROAD  
#221E  
PALM BEACH GARDENS, FL 334102525 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:** SAMANTHA SIMONS, SPECIAL SECRETARY

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

**Title:** CD      ( ) Delete  
**Name:** SLEWETT, NATHAN  
**Address:** 1501 N.W. 9TH AVENUE  
**City-St-Zip:** MIAMI, FL 33136 US

**Title:** VC      ( ) Delete  
**Name:** ZEMEL, HERBERT C  
**Address:** 1501 N.W. 9TH AVE.  
**City-St-Zip:** MIAMI, FL 33136 US

**Title:** S      ( ) Delete  
**Name:** SLEWETT, ALAN  
**Address:** 1501 N.W. 9TH AVE.  
**City-St-Zip:** MIAMI, FL 33136 US

**Title:** D      ( ) Delete  
**Name:** KRAVITZ, HAROLD  
**Address:** 7600 WEST 20 AVE., #223  
**City-St-Zip:** HIALEAH, FL 33016

**Title:** PD      ( ) Delete  
**Name:** ARTY, DAN  
**Address:** 1501 NW 9 AVE  
**City-St-Zip:** MIAMI, FL 33136 US

**Title:** D      ( ) Delete  
**Name:** BARASH, JEFFREY  
**Address:** 1140 KANE CONCOURSE  
**City-St-Zip:** BAY HARBOR ISLAND, FL 33154

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

**Title:** CD      (X) Change ( ) Addition  
**Name:** FOGEL, DR BERNARD  
**Address:** 1501 N.W. 9TH AVENUE  
**City-St-Zip:** MIAMI, FL 33136 US

**Title:** VC      (X) Change ( ) Addition  
**Name:** ALHADEFF, E. RICHARD  
**Address:** 1501 N.W. 9TH AVE.  
**City-St-Zip:** MIAMI, FL 33136 US

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

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

**Title:** P      (X) Change ( ) Addition  
**Name:** OBERDORF, JOYCE  
**Address:** 1501 NW 9 AVE  
**City-St-Zip:** MIAMI, FL 33136 US

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

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

**SIGNATURE:** S. SIMONS AS ATTORNEY-IN-FACT

D

10/10/2008

Electronic Signature of Signing Officer or Director

Date