

# 2010 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N08000009822

**FILED**  
**Nov 30, 2010**  
**Secretary of State**

**Entity Name:** THE VIRGIL HAWKINS JUSTICE FOUNDATION, INC.

**Current Principal Place of Business:**

C/O LETISHA BIVINS  
3073 HORSESHOE DRIVE SOUTH, SUITE 210  
NAPLES, FL 34104

**New Principal Place of Business:**

C/O DETRA SHAW-WILDER, ESQ  
2525 PONCE DE LEON BLVD, 9TH FLOOR  
MIAMI, FL 33134

**Current Mailing Address:**

C/O LETISHA BIVINS  
3073 HORSESHOE DRIVE SOUTH, SUITE 210  
NAPLES, FL 34104

**New Mailing Address:**

C/O DETRA SHAW-WILDER, ESQ  
2525 PONCE DE LEON BLVD, 9TH FLOOR  
MIAMI, FL 33134

**FEI Number:** 26-3596960

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

BIVINS, LETISHA D  
3073 HORSESHOE DRIVE SOUTH  
SUITE 210  
NAPLES, FL 34104 US

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

SHAW-WILDER, DETRA D  
2525 PONCE DE LEON BLVD  
9TH FLOOR  
MIAMI, FL 33134 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: DETRA SHAW-WILDER

11/30/2010

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: D, P  
Name: SHAW-WILDER, DETRA  
Address: 2525 PONCE DE LEON BLVD, 9TH FLOOR  
City-St-Zip: MIAMI, FL 33134

Title: D  
Name: KNOX, ANQUELIQUE  
Address: PO BOX 111  
City-St-Zip: TALLAHASSEE, FL 32302

Title: D  
Name: MUNSON, RACHELLE  
Address: PO BOX 4457  
City-St-Zip: APOPKA, FL 327044457

Title: D  
Name: BRYANT-WILLIS, ARNELL  
Address: 9065 FOXWOOD DRIVE  
City-St-Zip: TALLAHASSEE, FL 32308

Title: D  
Name: MCKINNEY, JUNE  
Address: 1230 APALACHEE PARKWAY  
City-St-Zip: TALLAHASSEE, FL 32301

I hereby 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 all other like empowered.

SIGNATURE: DETRA SHAW-WILDER

PRES

11/30/2010

Electronic Signature of Signing Officer or Director

Date