#### 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: LEVERETT, CASSANDRA

City-State-Zip: JACKSONVILLE FL 32256

Electronic Signature of Signing Officer/Director Detail

#### DOCUMENT# N1400000048

Entity Name: MOTHERS STANDING IN THE GAP, INC

#### **Current Principal Place of Business:**

7901 BAYMEADOWS CIRCLE E APT 467 JACKSONVILLE, FL 32256

#### **Current Mailing Address:**

PO BOX 10344 JACKSONVILLE, FL 32247

### FEI Number: 46-2062676

# Name and Address of Current Registered Agent:

LEVERETT, CASSANDRA 7901 BAYMEADOWS CIRCLE E APT 467 JACKSONVILLE, FL 32256 US

Certificate of Status Desired: Yes

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:

Electronic Signature of Registered Agent

## **Officer/Director Detail :**

	Title	D	Title	D
	Name	JOHNSON, ANN	Name	GARDNER, ANITA
	Address	12321 BUCKS HARBOR DRIVE S.	Address	2242 BRISTOL SPRING COURT
	City-State-Zip:	JACKSONVILLE FL 32225	City-State-Zip:	JACKSONVILLE FL 32246
	Title	PD	Title	CEO
	Name	LEVERETT, CASSANDRA	Name	LEVERETT, CASSANDRA
	Address	7901 BAYMEADOWS CIRCLE E, APT. 467	Address	7901 BAYMEADOWS CIRCLE E, APT. 467
	City-State-Zip:	JACKSONVILLE FL 32256	City-State-Zip:	JACKSONVILLE FL 32256
	Title	D		
	Name	LEVERETT, BOBBY		
	Address	7901 BAYMEADOWS CIRCLE E, APT. 467		

PRES/CEO

04/11/2019

Date

### FILED Apr 11, 2019 Secretary of State 0881450266CC

Date