2007 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

FILED

2007 OCT 26 PM 12:48

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # F01000002320

1. Entity Name
JACK AND JILL OF AMERICA, INCORPORATED

Principal Place of Business	Mailing Address
1930 17TH STREET N.W. WASHINGTON, DC 20009	1930 17TH STREET N.W. WASHINGTON, DC 20009

10042007 REIN-NP CR2E099 (1/07)

2. Principal Place of Business, No P.O. Box #	3. Mailing Address
1930 17th St. N.W.	1930 17th St. N.W.
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Washington, D.C.	City & State: Washington, DC
Zip: 20009 Country	Zip: 20009 Country

4. FEI Number: 43-6051526 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324	Name Street Address (P.O. Box Number is Not Acceptable) 100111380081 City FL Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS $61.25
After January 1, 2008, Fee will be $122.50

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

Make check payable to Florida Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P PEOPLES, ALICE L 1930 17TH STREET N.W. WASHINGTON, DC 20009	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	President Bowles, Jacqueline 20009 1930 17th St. N.W. Washington D.C.
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	V DAVIS, EVELYN 1930 17TH STREET N.W. WASHINGTON, DC 20009	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☑ Change ☐ Addition Vice-Pres. Johnson, Gail 1930 17th St N.W. Washington D.C. 20009
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S BAKER-KELSEY, MURVYN 1930 17TH STREET N.W. WASHINGTON, DC 20009	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☑ Change ☐ Addition Secretary Henderson, Kimberly 1930 17th St N.W Washington D.C. 20009
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T BAKER-WHITE, DAYATRA 1930 17TH STREET N.W. WASHINGTON, DC 20009	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☑ Change ☐ Addition Treasurer James, Mavis Washington 1930 17th St. N.W. D.C. 20009
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: _____ National Treasurer 10/17/07 6013624294
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #