

2006 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# F02000004954

FILED
Aug 30, 2006
Secretary of State

Entity Name: THE HAGEN FAMILY FOUNDATION CORPORATION

Current Principal Place of Business:

2760 NE 16TH STREET
FORT LAUDERDALE, FL 33304

New Principal Place of Business:

Current Mailing Address:

2760 NE 16TH STREET
FORT LAUDERDALE, FL 33304

New Mailing Address:

FEI Number:

FEI Number Applied For ()

FEI Number Not Applicable (X)

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HAGEN, DAVID
2760 NE 16TH STREET
FORT LAUDERDALE, FL 33304 US

Name and Address of New Registered Agent:

HAGEN, DAVID F
2760 NE 16TH STREET
FORT LAUDERDALE, FL 33304 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: DAVID F HAGEN

08/30/2006

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: HAGEN, DAVID F
Address: 2760 NE 16TH STREET
City-St-Zip: FORT LAUDERDALE, FL 33304

Title: DVST () Delete
Name: HAGEN, VIRGINIA L
Address: 2760 NE 16TH STREET
City-St-Zip: FORT LAUDERDALE, FL 33304

Title: D () Delete
Name: HAGEN, ANDREW
Address: 2760 NE 16TH STREET
City-St-Zip: FORT LAUDERDALE, FL 33304

Title: D () Delete
Name: BORN, PATRICIA HAGEN
Address: 2760 NE 16TH STREET
City-St-Zip: FORT LAUDERDALE, FL 33304

Title: D () Delete
Name: HAGEN, LAURA
Address: 2760 NE 16TH STREET
City-St-Zip: FORT LAUDERDALE, FL 33304

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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

I hereby certify that the information supplied with this filing does not qualify for the 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: DAVID F HAGEN

DP

08/30/2006

Electronic Signature of Signing Officer or Director

Date