

2006 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# F02000006406

FILED
Oct 30, 2006
Secretary of State

Entity Name: BOUNDLESS PLAYGROUNDS, INC.

Current Principal Place of Business:

45 WINTONBURY AVENUE
BLOOMFIELD, CT 06002

New Principal Place of Business:

Current Mailing Address:

45 WINTONBURY AVENUE
BLOOMFIELD, CT 06002

New Mailing Address:

FEI Number: 06-1512497

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

BUSINESS FILINGS INCORPORATED
1203 GOVERNORS SQUARE BLVD
SUITE 101
TALLAHASSEE, FL 323012960 US

Name and Address of New Registered Agent:

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: MARK SCHIFF

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: T () Delete
Name: LEFKOWITZ, DAVID R
Address: 533 COTTAGE GROVE ROAD
City-St-Zip: BLOOMFIELD, CT 06002

Title: V () Delete
Name: BRIGHAM, NEIL
Address: 115 PERIMETER CENTER PLACE NE S. TERRACES
City-St-Zip: ATLANTA, GA 30346

Title: S () Delete
Name: CORSEY, CHUCK
Address: PO BOX 271834
City-St-Zip: WEST HARTFORD, CT 06106

Title: D () Delete
Name: BARZACH, AMY
Address: 45 WINTONBURY AVENUE
City-St-Zip: BLOOMFIELD, CT 06002

Title: P () Delete
Name: JACQUES, BERNARD
Address: 225 ASYLUM STREET
City-St-Zip: HARTFORD, CT 06103

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: T (X) Change () Addition
Name: DEMBO, AMY
Address: 66 HARTWELL ROAD
City-St-Zip: WEST HARTFORD, CT 06117

Title: V (X) Change () Addition
Name: BROWN, BARBARA
Address: 48 SENECA ROAD
City-St-Zip: WEST HARTFORD, CT 06117

Title: P (X) Change () Addition
Name: HELLMAN, ILENE
Address: 115 WOODLAND HILLS DRIVE
City-St-Zip: AVON, CT 06001 39

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

Title: D (X) Change () Addition
Name: JACQUES, BERNARD
Address: 225 ASYLUM STREET
City-St-Zip: HARTFORD, CT 06103

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: AMY JAFFE BARZACH

D

10/30/2006

Electronic Signature of Signing Officer or Director

Date