2009 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# F08000004049

City-St-Zip: ORLANDO, FL 32832

Entity Name: ANNIKA FOUNDATION, INC.

FILED Oct 22, 2009 Secretary of State

Entity Nar	THE: ANNIKA FOUNDATION, INC.			
Current P	rincipal Place of Business:	New Principal Place of	New Principal Place of Business:	
	SS PARK RD. 204 #159), FL 32832			
Current M	ailing Address:	New Mailing Address:	New Mailing Address:	
	SS PARK RD. 204 #159), FL 32832	800 MAIN STREET PMB 154 HOLDEN, MA 01520		
FEI Number: In accordance	26-3100887 FEI Number Applied For () ce with s. 607.193(2)(b), F.S., the corporation did	FEI Number Not Applicable() not receive the prior notice.	Certificate of Status Desired ()	
Name and	Address of Current Registered Agent:	Name and Address of I	New Registered Agent:	
10524 MOS	ADAELLI, ANGELA SS PARK RD. 204 #159 D, FL 32832 US	OCHSENREITER, DON 10524 MOSS PARK RD. ORLANDO, FL 32832	204 #159 US	
	named entity submits this statement for the e of Florida.	purpose of changing its registered of	office or registered agent, or both,	
SIGNATUR	RE: DON OCHSENREITER		10/22/2009	
	Electronic Signature of Registered A	gent	Date	
OFFICERS AND DIRECTORS:		ADDITIONS/CHANGES	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	CHRM () Delete DUTTON, DANIEL 10524 MOSS PARK RD. 204 #159 ORLANDO, FL 32832	Title: (Name: Address: City-St-Zip:) Change ()Addition	
Title: Name: Address: City-St-Zip:	D () Delete SORENSTAM, ANNIKA 10524 MOSS PARK RD. 204 #159 ORLANDO, FL 32832	Title: (Name: Address: City-St-Zip:) Change ()Addition	
Title: Name: Address: City-St-Zip:	D () Delete MECHEM, CHARLES 10524 MOSS PARK RD. 204 #159 ORLANDO, FL 32832	Title: (Name: Address: City-St-Zip:) Change ()Addition	
Title: Name: Address: City-St-Zip:	T () Delete IACONE-RADAELLI, ANGELA 10524 MOSS PARK RD. 204 #159 ORLANDO, FL 32832	Title: (Name: Address: City-St-Zip:) Change ()Addition	
Title: Name: Address:	S () Delete SHEETZ, MICHAEL 10524 MOSS PARK RD, 204 #159	Title: (Name: Address:) Change ()Addition	

I hereby certify that the information supplied with this filing does not qualify 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.

City-St-Zip:

SIGNATURE: ANGELA IACONE-RADAELLI T 10/22/2009