2007 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# F95000000912

Entity Name: CHILD WELFARE INSTITUTE, INC.

FILED Dec 05, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

2132 SILVA DRIVE 111 E. WACKER DR. CONLEY, GA 30288 US

SUITE 325

CHICAGO, IL 60601 US

Current Mailing Address: New Mailing Address:

111 E. WACKER DR. 2132 SILVA DRIVE CONLEY, GA 30288 US

SUITE 325

CHICAGO, IL 60601

FEI Number: 56-1392972 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

BLACK, JANET CT CORPORATION SYSTEM 2107 DELTA WAY 1200 SOUTH PINE ISLAND ROAD

TALLAHASSEE, FL 323034209 US PLANTATION, FL 33324

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: KIMBERLY BREUNLING 12/05/2007

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change () Addition () Delete

SALOVITZ, BARRY SINNOTT, MARTIN R Name: Name:

2132 SILVA DRIVE Address: 111 E. WACKER DR., SUITE 325 Address: City-St-Zip: CONLEY, GA 30288 City-St-Zip: CHICAGO, IL 60601

(X) Change () Addition Title: Title: () Delete CALICA, RICHARD Name: OSTEEN, SANDRA Name:

Address: 1707 N HALSTED Address: 10463 COUNTY ROAD 115 City-St-Zip: CHICAGO, IL 60614 City-St-Zip: OXFORD, FL 34484

Title: () Delete Title: (X) Change () Addition CHAPMAN, SHERYL B Name: TURNER, THOMAS W REV. DR Name: 6301 GREENTREE ROAD 911 BRENTWOOD COURT Address: Address: City-St-Zip: BETHESDA, MD 20817 City-St-Zip: NEW ALBANY, IN 47150

Title: () Delete Title: (X) Change () Addition

HUMPHREY, SCOTT W Name: COFFEY, LESTER Name: 4720 MONTGOMERY LANE STE. 1050 795 GROVE ST. Address: Address: City-St-Zip: BETHESDA, MD 20814 City-St-Zip: GLENCOE, IL 60022

Title: () Delete Title: (X) Change () Addition

MORTON, THOMAS D SMITH, TONI S Name: Name:

3950 SHCAKLEFORD ROAD SUITE 175 3470 N. LAKE SHORE DRIVE Address: Address:

CHICAGO, IL 60657 City-St-Zip: DULUTH, GA 30096 City-St-Zip:

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.

Ρ SIGNATURE: MARTIN R. SINNOTT 12/05/2007