	PLEASE READ	ALL INST	RUCTIONS	BEFORE C	OMPLET	ING THIS FOR	M		
APRLIGATION FLORIDA DEPARTMENT OF STATE									
+ 6	ALL AND		Sandra B. Mor Secretary of S			98 DEC -7 AM	10.00		
REINSTATEMENT Division of corporations									
DOCUMENT # L32553						SECRETARY OF STATE TALLAHASSEE, FLORIDA			
CHILD GRO	OWTH AND DEVELO	OPMENT,	INCORPOR	ATED	ļ				
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2428 HARTSFIELD I TALLAHASSEE FL 3		2428 HARTSFIELD RD. TALLAHASSEE FL 32303							
					}				
	es are incorrect In any way, line thr								
·	Office Address, If Applicable	3. New Maili	3. New Mailing Office Address, If Applicable			4. Date Incorporated or Qualified To Do Business in Florida 11/29/1989			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			5. FEI Number Applied For				
City & State		City & State			59-2981096 Not Applicable				
Zip Country		Zip Country		y	6. CERTIFICATE OF STATUS DESIRED State for a Certificate of State			luired lus	
7. Names and Str	eet Addresses of Each Officer and	or Director (Flo	rida nonprofit corpora	tions must list at lea	ast 3 directors)				
Title(s)	Name of Officers and/or Directors		Str Off	et Address of Each icer and/or Director Post Office Box Nu	 	City	/ / State / Zip		
1 2 PTS HOWELL, LEYSHIA A-		2428 HARTSFIEL				4			
Fontenot, Levishia A.									
VP FONT	P FONTENOT, ROMAN E 2428 HAI			iartsfield RD.		TALLAHASSEE FL 32303		ļ	
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{8	. Name and Address of Current	Registered Age	<u> </u>		9. Name and /	Address of New Registe	red Agent		
Fontenot, Leyshia A						^	1		
HOWELL, LEYSHIA A. Street Address (is Not Acceptable)	rot	CR2E040 (9/96	
2428 HARTSFIELD RD. TALLAHASSEE FL FL 32303					<u>s Hartsfield Rd</u>				
					NIA State Zip Code				
	nted the registered agent of the abo	un named com	nation on familiar wi	Tallah	Lasser	[]	FL 32303	2	
Signature of				IRED	Digasons of Seca	1	-1		
Registered Agent	<u> </u>		ENT MUST SIGN			Date	3 40		
	orporation owes or h						er side for information intangible tax.)		
Intangi	ble Personal Proper	ty tax due	June 30.	Yes 🗀	No 🛄				
this reinstatem owed by the co	Im an officer or director or the recei- ent application, the reason for disso provation have been paid and the tion is true and accurate, and my si	plution has been names of individ	eliminated, the corpo	rate name satisfies m do not qualify for	the requirements an exemption une	of section 607.0401 or 6	17.0401, F.S., that all fee:	5	
SIGNATURE	SIGNATURE AND TYPED OR PR	BONE INTED NAME OF		PEDA For	itenet_	12/3/98 (850 385-22-58 Daytime Phone #		
	``						0004941]	

CHILD GROWTH & DEVELOPMENT, INC. 2428 HARTSFIELD ROAD TALLAHASSEE, FLORIDA 32303 (850) 385-2258

DECEMBER 3, 1998

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DIVISION OF CORPORATIONS ANNUAL REPORT/REINSTATEMENT SECTION P.O. BOX 6327 TALLAHASSEE, FLORIDA 32314-6327

TO WHOM IT MAY CONCERN:

PLEASE BE ADVISED THAT WE HAVE NOT RECEIVE AN APPLICATION FOR FILING THE ANNUAL REPORT FOR THE CURRENT YEAR. WE HAVE CONTACTED THE OFFICE AND OBTAINED THE INFORMATION ON HOW TO FILE IN THE FUTURE IN THE EVENT THAT WE MAY NOT RECEIVE THE APPLICATION PACKAGE.

ENCLOSED PLEASE FIND OUR FILING FEE IN THE AMOUNT OF \$150.00. THANK YOU FOR YOUR COOPERATION.

VERY TRULY YOURS,

meterial Pres. الموسع

LEYSHIA FONTENOT PRESIDENT