

2007 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

**FILED
Oct 05, 2007
Secretary of State**

DOCUMENT# N00000001822

Entity Name: HISTORY, HERITAGE AND HOPE FOUNDATION, INC.

Current Principal Place of Business:

55 5TH ST. S.
ST. PETERSBURG, FL 33701

New Principal Place of Business:

Current Mailing Address:

55 5TH ST. S.
ST. PETERSBURG, FL 33701

New Mailing Address:

FEI Number: 59-3643874 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

INTRASTATE REGISTERED AGENT CORPORATION
701 BRICKELL AVE., STE. 3000
MIAMI, FL 33131 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: RICHARD P. SILLS

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: LOEBENBERG, WALTER
Address: 7834 9TH AVE. S.
City-St-Zip: ST. PETRSBURG, FL 33707

Title: DT () Delete
Name: MIZRAHI, RALPH
Address: 7011 MANGO AVE SOUTH
City-St-Zip: SAINT PETERSBURG, FL 33707

Title: D () Delete
Name: ALLWEISS, ALLAN ESQ
Address: 28 PARADISE LN
City-St-Zip: TREASURE ISLAND, FL 337061129

Title: P () Delete
Name: KOKOL, ROBERT
Address: C/O RAYMOND JAMES CO. 880 GARILLION WAY
City-St-Zip: SAINT PETERSBURG, FL 33716

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:

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.

SIGNATURE: ROBERT KOKOL

PRES

10/05/2007

Electronic Signature of Signing Officer or Director

Date