

# 2007 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N00000003718

FILED  
Feb 01, 2007  
Secretary of State

**Entity Name:** MARIAN CHARITABLE FOUNDATION, INC.

**Current Principal Place of Business:**

12100 WEST DIXIE HIGHWAY  
NORTH MIAMI, FL 33161

**New Principal Place of Business:**

**Current Mailing Address:**

12100 WEST DIXIE HIGHWAY  
NORTH MIAMI, FL 33161

**New Mailing Address:**

**FEI Number:** 65-1051283      **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:**

DONIGER, JOE  
2821 SW 73 WAY  
# 1806  
DAVIE, FL 33314 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: JOE DONIGER

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: DP ( ) Delete  
Name: MCDEARMAID, MICHAEL  
Address: 840 N.E. 127TH STREET  
City-St-Zip: N MIAMI BEACH, FL 33161

Title: D ( ) Delete  
Name: MCNICHOLAS, VINCE  
Address: 16440 84 COURT NORTH  
City-St-Zip: LOXAHATCHEE, FL 33470

Title: DS ( ) Delete  
Name: HELD, JEFF  
Address: 12500 NE 15 AVENUE # 511  
City-St-Zip: MIAMI, FL 33161

Title: D ( ) Delete  
Name: ROMANIK, TOM  
Address: 195 NW 103 STREET  
City-St-Zip: MIAMI SHORES, FL 33150

Title: D ( ) Delete  
Name: MCENROE, JOHN  
Address: 13510 SW 6 PLACE  
City-St-Zip: DAVIE, FL 33325

Title: D ( ) Delete  
Name: SANFILIPPO, SAM  
Address: 1015 N.E. 127TH STREET #21  
City-St-Zip: NORTH MIAMI, FL 33161

**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:

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 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: MICHAEL MCDEARMAID

DP

02/01/2007

Electronic Signature of Signing Officer or Director

Date