## 2006 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

## DOCUMENT# N01000003698

FILED Oct 25, 2006 Secretary of State

Entity Name: GREATER NEW COVENANT CHILD CARE INC.

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

255 NE 2ND DR. 3346 N 11 DRIVE

HOMESTEAD, FL 33030 HOMESTEAD, FL 33033

Current Mailing Address: New Mailing Address:

255 NE 2ND DR. PO BOX 901456

HOMESTEAD, FL 33030 HOMESTEAD, FL 33090

FEI Number: 31-1787765 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:

SEWELL, JOSEPH G SEWELL, JOSEPH G 1580 NW 16TH AVE. SEWELL, JOSEPH G 3346 N 11 DRIVE

MIAMI, FL 33030 US HOMESTEAD, FL 33033 US

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: JOSEPH SEWELL 10/25/2006

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

 Name:
 SEWELL, JOSEPH
 Name:
 SEWELL, JOSEPH

 Address:
 1580 NW 16TH AVE.
 Address:
 3346 N 11 DRIVE

 City-St-Zip:
 HOMESTEAD, FL 33030
 City-St-Zip:
 HOMESTEAD, FL 33033

Title: VP ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 MABRY, GEORGE
 Name:

 Address:
 590 N.W. 6TH AVE
 Address:

 City-St-Zip:
 FLORIDA CITY, FL 33117
 City-St-Zip:

 Name:
 BURTH, CAROLYN
 Name:

 Address:
 255 N.E. 2ND DRIVE
 Address:

 City-St-Zip:
 HOMESTEAD, FL 33030
 City-St-Zip:

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

 Name:
 SEWELL, ELIZABETH
 Name:
 SEWELL, BRIDGET

 Address:
 1580 NW 16TH AVE.
 Address:
 3346 N 11 DRIVE

 City-St-Zip:
 MIAMI, FL 33030
 City-St-Zip:
 MIAMI, FL 33033

Title: D () Delete Title: () Change () Addition

 Name:
 SEWELL, SALÍSHA S
 Name:

 Address:
 1580 NW 16TH AVE.
 Address:

 City-St-Zip:
 HOMESTEAD, FL 33030
 City-St-Zip:

Title: D ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 SEWELL, CRYSTAL
 Name:

 Address:
 1580 NW 16TH AVE.
 Address:

 City-St-Zip:
 HOMESTEAD, FL 33030
 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: JOSEPH SEWELL PD 10/25/2006