


2008 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT # N01000005847

1. Entity Name
THE JUANITA MINCEY FOUNDATION, INC.



FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

08 APR 30 AM 10:46

100123766861
04/16/08--01019--021 **297.50



04052008 REIN-NP CR2E099 (1/07)

Principal Place of Business
**P.O. BOX 278827
MIRAMAR, FL 33027**

Mailing Address
**PO BOX 278827
MIRAMAR, FL 33027**

2. Principal Place of Business - No P.O. Box #
12868 SW 21st

3. Mailing Address
12868 SW 21st

Suite, Apt. #, etc.

City & State
MIRAMAR, FL

City & State
MIRAMAR, FL

Zip
33027

Country
Broward

Zip
33027

Country
Broward

4. FEI Number
03-0386110

Applied For
 Not Applicable

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**JUANITA, MINCEY
12868 SW 21 STREET
MIRAMAR, FL 33027**

7. Name and Address of New Registered Agent

Name
DENISE MINCEY-MILLS

Street Address (P.O. Box Number is Not Acceptable)
~~PO BOX 278827~~ **12868 SW 21st**

City
MIRAMAR

FL Zip Code
33027

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE *Denise Mincey-Mills*
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

100123766861
04/16/08--01019--022 **8.75

DATE 1/1

FILE NOW!!! FEE IS \$297.50

**Make check payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PRES JUANITA, MINCEY P.O. BOX 278827 MIRAMAR, FL 33027 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V NEPTUNE, GWENDOLYN P.O. BOX 278827 MIRAMAR, FL 33027 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST MINCEY, CARNELL P.O. BOX 278827 MIRAMAR, FL 33027 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T SCOTT, ELIZABETH P.O. BOX 278827 MIRAMAR, FL 33027 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	67-08 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PRESIDENT DENISE MINCEY-MILLS P.O. Box 278827 MIRAMAR FL 33027 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VICE PRESIDENT ALICIA GAIL GRAY P.O. Box 278827 MIRAMAR FL 33027 <input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SECRETARY ALICIA GAIL GRAY P.O. Box 278827 MIRAMAR FL 33027 <input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TREASURER DENISE MINCEY-MILLS P.O. Box 278827 MIRAMAR FL 33027 <input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	BOARD MEMBER CARNELL MINCEY P.O. Box 278827 MIRAMAR FL 33027 <input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	BOARD MEMBER Gloria Solomon P.O. Box 278827 MIRAMAR FL 33027 <input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Denise Mincey-Mills* **-DENISE Mincey-Mills - 4/12/08 - 954-937-2198**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #