

# 2006 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N01000007952

FILED  
May 08, 2006  
Secretary of State

**Entity Name:** ALLIANCE FOR FAMILIES WITH DEAF CHILDREN, INC.

**Current Principal Place of Business:**

3733 NW 107 WAY  
SUNRISE, FL 33351

**New Principal Place of Business:**

1350 EAST SUNRISE BOULEVARD  
SUITE 105  
FT. LAUDERDALE, FL 33304

**Current Mailing Address:**

3733 NW 107 WAY  
SUNRISE, FL 33351

**New Mailing Address:**

1350 EAST SUNRISE BOULEVARD  
SUITE 105  
FT. LAUDERDALE, FL 33304

**FEI Number:** 65-1151390      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired (X)**  
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:**

JONES, JENNIFER  
3733 NW 107 WAY  
SUNRISE, FL 33351      US

**Name and Address of New Registered Agent:**

JONES, JENNIFER  
812 WEST PLANTATION CIRCLE  
PLANTATION, FL 33324      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: JENNIFER JONES

05/08/2006

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: D      ( ) Delete  
Name: HERNANDEZ, DANETTE L MRS.  
Address: 9610 SW 45 TERR  
City-St-Zip: MIAMI, FL 33165

Title: D      ( ) Delete  
Name: JONES, JENNIFER H MRS.  
Address: 3733 NW 107 WAY  
City-St-Zip: SUNRISE, FL 33351

Title: D      ( ) Delete  
Name: HOFFMAN, REBECCA MRS.  
Address: 2050 FORT DENAUD RD  
City-St-Zip: LABELLE, FL 33935

Title: O      ( ) Delete  
Name: FINNEGAN, MARGARET DR.  
Address: PO BOX 1027  
City-St-Zip: ST. AUGUSTINE, FL 32085

Title: O      ( ) Delete  
Name: COHN, CHRISTIE MS.  
Address: 117 NE 95 STREET  
City-St-Zip: MIAMI SHORES, FL 33138

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: D      (X) Change ( ) Addition  
Name: DAVID, DEBORAH  
Address: 6301 NW 5TH WAY SUITE 3400  
City-St-Zip: FT. LAUDERDALE, FL 33309

Title: D      (X) Change ( ) Addition  
Name: PERO, PATRICIA  
Address: 1565 NW 159TH AVE.  
City-St-Zip: PEMBROKE PINES, FL 33028

Title: D      (X) Change ( ) Addition  
Name: BURNS- HOFFMAN, REBECCA MRS.  
Address: 5717 FISHERMAN'S DRIVE  
City-St-Zip: BRADENTON, FL 34209

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: O      (X) Change ( ) Addition  
Name: COHN, CHRISTIE MS.  
Address: 2511 CAT CAY LANE  
City-St-Zip: FT. LAUDERDALE, FL 33312

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: REBECCA BURNS- HOFFMAN

MS.

05/08/2006

Electronic Signature of Signing Officer or Director

Date