

2005 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N02000004746

FILED
Oct 07, 2005
Secretary of State

Entity Name: FLORIDA'S CHILDREN FIRST, INC.

Current Principal Place of Business:

1801 NORTH UNIVERSITY DRIVE
CORAL SPRINGS, FL 33071

New Principal Place of Business:

Current Mailing Address:

1801 NORTH UNIVERSITY DRIVE
CORAL SPRINGS, FL 33071

New Mailing Address:

FEI Number: 52-2372998

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MOORE, ANDREA
1801 NORTH UNIVERSITY DRIVE
CORAL SPRINGS, FL 33071 US

Name and Address of New Registered Agent:

GIEVERS, KAREN
524 EAST COLLEGE AVENUE
TALLAHASSEE, FL 32301 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: KAREN GIEVERS

10/07/2005

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: S/D () Delete
Name: MOORE, ANDREA
Address: 1801 N. UNIVERSITY DRIVE
City-St-Zip: CORAL SPRINGS, FL 33071 US

Title: T/D () Delete
Name: GIEVERS, KAREN
Address: 524 EAST COLLEGE AVENUE, SUITE 2
City-St-Zip: TALLAHASSEE, FL 32301 US

Title: D () Delete
Name: GLYNN, GERARD F
Address: 6441 EAST COLONIAL DRIVE
City-St-Zip: ORLANDO, FL 32807 US

Title: P/D () Delete
Name: TALENFELD, HOWARD M
Address: 2000 WEST COMMERCIAL BOULEVARD, SUITE 232
City-St-Zip: FORT LAUDERDALE, FL 33309 US

Title: V/D () Delete
Name: SCHROTH, DEBORAH
Address: 126 W. ADAMS STREET, SUITE 502
City-St-Zip: JACKSONVILLE, FL 32202 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: S/D (X) Change () Addition
Name: ROSENBERG, ROBIN
Address: PO BOX 3542
City-St-Zip: SAINT PETERSBURG, FL 33731 US

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

Title: D (X) Change () Addition
Name: WILLIAMS, MAXINE
Address: 423 FERN ST.
City-St-Zip: W. PALM BEACH, FL 33401 US

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 Section 119.07(3)(i), 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: KAREN GIEVERS

T/D

10/07/2005

Electronic Signature of Signing Officer or Director

Date