

DOCUMENT # 1102000007311

1. Entity Name
FATHERHOOD ASSISTANCE, LIFESTYLE & LEGAL SERVICES, INC.



Principal Place of Business
4202 NASSAU ST.
TAMPA, FL 33607

Mailing Address
4202 NASSAU ST.
TAMPA, FL 33607

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country
USA

Zip
33607

Country
USA

05112005 Chg-NP CR2E037 (10/03)

4. FEI Number
02-0688397

Applied For
Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

LEWIS, GEORGE REV.
4206 W. NASSAU ST.
TAMPA, FL 32607

Name Fred L. Gray
Street Address (P.O. Box Number is Not Acceptable)

4217 NASSAU ST
City Tampa FL Zip Code 33607

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

Handwritten signature of Fred L. Gray

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reconstating)

9-31-05
DATE

Filing Fee is \$61.25
Due by September 7, 2005

9. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

Make check payable to Florida Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE D Delete
NAME GRAY, FRED DEACON
STREET ADDRESS 4217 W. NASSAU ST.
CITY - ST - ZIP TAMPA, FL 33607

TITLE Change Addition
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE D Delete
NAME GRAY, JIMMIE L
STREET ADDRESS 1709 N. HOWARD AVE.
CITY - ST - ZIP TAMPA, FL 33607

TITLE Change Addition
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE D Delete
NAME JOHNSON, WILLIAM
STREET ADDRESS 1707 E. FRIERSON AVE.
CITY - ST - ZIP TAMPA, FL 33610

TITLE Change Addition
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE D Delete
NAME LEWIS, GEORGE REV.
STREET ADDRESS 4206 W. NASSAU ST.
CITY - ST - ZIP TAMPA, FL 33607

TITLE Change Addition
NAME Edward Cooper
STREET ADDRESS 3410 McBerry
CITY - ST - ZIP TAMPA FL 33601

TITLE D Delete
NAME REEVES, CHARLENE W
STREET ADDRESS 1928 W. SPRUCE ST.
CITY - ST - ZIP TAMPA, FL 336073010

TITLE Change Addition
NAME William Charles
STREET ADDRESS 6903 N Cameron Ave
CITY - ST - ZIP TAMPA FL 33614

TITLE D Delete
NAME REESE, LINDA REV.
STREET ADDRESS 1928 W. SPRUCE ST.
CITY - ST - ZIP TAMPA, FL 336073010

TITLE Change Addition
NAME
STREET ADDRESS
CITY - ST - ZIP

12. I hereby certify that the information supplied with this filing does not qualify 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 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:

Handwritten signature of Fred L. Gray

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5-31-05 813-875-7516
Date Daytime Phone #