

2004 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N03000004607

FILED
Oct 20, 2004
Secretary of State**Entity Name:** MAD DADS OF GREATER BOYNTON BEACH, INC.**Current Principal Place of Business:**203 SW 14TH AVENUE
DELRAY BEACH, FL 33444**New Principal Place of Business:**531 NW 10TH AVE
BOYNTON BEACH, FL 33435**Current Mailing Address:**203 SW 14TH AVENUE
DELRAY BEACH, FL 33444**New Mailing Address:**531 NW 10TH AVE
BOYNTON BEACH, FL 33435**FEI Number:** 27-0064773 **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:**JACKSON, DORIS
531 N.W. 10TH AVENUE
BOYNTON BEACH, FL 33435 US**Name and Address of New Registered Agent:**

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: _____

Electronic Signature of Registered Agent

Date**OFFICERS AND DIRECTORS:****Title:** D () Delete
Name: BRYANT, AUSBEE B JR
Address: 203 SW 14TH AVENUE
City-St-Zip: DELRAY BEACH, FL 33444**Title:** PD () Delete
Name: BRYAN, VALERIE
Address: 203 SW 14TH AVENUE
City-St-Zip: DELRAY BEACH, FL 33444**Title:** TD () Delete
Name: AULBURY, LEONARD II
Address: 120 NE 8TH AVENUE
City-St-Zip: BOYNTON BEACH, FL 33435**Title:** SD () Delete
Name: JACKSON, DORIS
Address: 531 NW 10TH AVENUE
City-St-Zip: BOYNTON BEACH, FL 33435**Title:** D () Delete
Name: FUSE, HENRY
Address: 1152 SOUTH PORT COURT
City-St-Zip: WELLINGTON, FL 33414**Title:** D () Delete
Name: WILLIAMS, TONYA H CHRM
Address: 410 NW 6TH AVENUE
City-St-Zip: BOYNTON BEACH, FL 33435**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** () Change () Addition
Name:
Address:
City-St-Zip:**Title:** () Change () Addition
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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: AUSBEE B BRYANT JR

D

10/20/2004

Electronic Signature of Signing Officer or Director_____
Date