

2009 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N03000005987

FILED
Oct 14, 2009
Secretary of State

Entity Name: BAHAMAS NATIONAL COMMITTEE FOR YOUTH RENEWAL, INC.

Current Principal Place of Business:

6505 PLUNKETT STREET
HOLLYWOOD, FL 33023

New Principal Place of Business:

Current Mailing Address:

6505 PLUNKETT STREET
HOLLYWOOD, FL 33023

New Mailing Address:

FEI Number: 98-0403816 **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:

Name and Address of New Registered Agent:

MCINTOSH, SHARELL ALI MS.
6505 PLUNKETT STREET
HOLLYWOOD, FL 33023 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: SHARELL ALI MCINTOSH

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: MCINTOSH, SHARELL ALI
Address: 6505 PLUNKETT STREET
City-St-Zip: HOLLYWOOD, FL 33023

Title: S () Delete
Name: GIBSON, LISA
Address: 6505 PLUNKETT STREET
City-St-Zip: HOLLYWOOD, FL 33023

Title: D () Delete
Name: ST. FLEUR, YAMMA
Address: 6505 PLUNKETT STREET
City-St-Zip: HOLLYWOOD, FL 33023

Title: D () Delete
Name: MCINTOSH, DORAL
Address: 6505 PLUNKETT STREET
City-St-Zip: HOLLYWOOD, FL 33023

Title: D () Delete
Name: WHITE, JANE H
Address: 6505 PLUNKETT STREET
City-St-Zip: HOLLYWOOD, FL 33023

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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

Title: D () Change (X) Addition
Name: ROLLE, GIL G
Address: 6505 PLUNKETT STREET
City-St-Zip: HOLLYWOOD, FL 33023

I hereby certify that the information supplied with this filing does not qualify 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: SHARELL ALI MCINTOSH

P

10/14/2009

Electronic Signature of Signing Officer or Director

Date