

# 2007 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N03000009167

**FILED**  
**Feb 23, 2007**  
**Secretary of State**

**Entity Name:** NATIONAL INSTITUTE FOR INNOVATIVE LEADERSHIP IN EARLY EDUCATION AND CARE, INC.

**Current Principal Place of Business:**

1230 NE 201 TERRACE  
MIAMI, FL 33179

**New Principal Place of Business:**

**Current Mailing Address:**

1230 NE 201 TERRACE  
MIAMI, FL 33179

**New Mailing Address:**

**FEI Number:** 56-2036688

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

LUNDGREN, MIRIEL W  
1230 NE 201 TERRACE  
MIAMI, FL 33179 US

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

LUNDGREN, MIRIEL W  
1230 NE 201 TERRACE  
MIAMI, FL 33179 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: MURIEL W LUNDGREN

02/23/2007

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: LUNDGREN, MIRIEL W  
Address: 1230 NE 201 TERRACE  
City-St-Zip: MIAMI, FL 33179

Title: ST (X) Delete  
Name: HARPER, MELISSA  
Address: 1310 LEWISVILLE-CLEMMONS ROAD  
City-St-Zip: LEWISVILLE, NC 27023

Title: D ( ) Delete  
Name: GENNETT, NICK  
Address: P.O. BOX 1595  
City-St-Zip: SAILSBURY, NC 28145

Title: D ( ) Delete  
Name: SEJECK, ANA  
Address: 3250 SW 3RD AVENUE  
City-St-Zip: MIAMI, FL 33129

Title: D ( ) Delete  
Name: HERNANDEZ, LUIS  
Address: 3790 IRVINGTON AVENUE  
City-St-Zip: MIAMI, FL 33133

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

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

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

Title: ST (X) Change ( ) Addition  
Name: GENNETT, NICK  
Address: P.O. BOX 1595  
City-St-Zip: SAILSBURY, NC 28145

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 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: MURIEL W LUNDGREN

P

02/23/2007

Electronic Signature of Signing Officer or Director

Date