

**2004 NOT-FOR-PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# N03000009513

**FILED**  
**Dec 01, 2004**  
**Secretary of State****Entity Name:** THE NEW LIFE DEVELOPMENTAL CENTER SCHOOL OF EXCELLENCE, INC.**Current Principal Place of Business:**2140 N.W. 2ND STREET  
POMPANO BEACH, FL 33060 US**New Principal Place of Business:**2140 N.W. 2ND STREET  
POMPANO BEACH, FL 33069 US**Current Mailing Address:**2140 N.W. 2ND STREET  
POMPANO BEACH, FL 33060 US**New Mailing Address:**1705 N. W. 4TH STREET  
POMPANO BEACH, FL 33069 US**FEI Number:** **FEI Number Applied For (X)** **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:**JENKINS, ALEX L  
15514 93RD STREET N.  
WEST PALM BEACH, FL 33412 US**Name and Address of New Registered Agent:**JENKINS, ALEX L DR.  
1705 N. W. 4TH STREET  
POMPANO BEACH, FL 33069 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: APOSTLE, DR. ALEX L. JENKINS

12/01/2004

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**Title: SEC ( ) Delete  
Name: JENKINS, LATRINA  
Address: 15514 93RD STREET N.  
City-St-Zip: WEST PALM BEACH, FL 33412 USTitle: DIR ( ) Delete  
Name: WARD, LORETTA  
Address: 1700 N.W. 2ND STREET  
City-St-Zip: POMPANO BEACH, FL 33060 USTitle: DIR ( ) Delete  
Name: BEARD, GAIL  
Address: 4510 N.W. 64TH TERRACE  
City-St-Zip: LAUDERHILL, FL 33319 USTitle: DIR ( ) Delete  
Name: BENNET, MARK  
Address: 2111 N.W. 2ND STREET  
City-St-Zip: POMPANO BEACH, FL 33060 USTitle: PRES ( ) Delete  
Name: JENKINS, ALEX L  
Address: 15514 93RD STREET N.  
City-St-Zip: WEST PALM BEACH, FL 33412 US**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**Title: SEC (X) Change ( ) Addition  
Name: JENKINS, LATRINA  
Address: 1705 N. W. 4TH STREET  
City-St-Zip: POMPANO BEACH, FL 33069 USTitle: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:Title: DIR (X) Change ( ) Addition  
Name: GARY, SHANNON  
Address: 2111 N.W. 2ND STREET  
City-St-Zip: POMPANO BEACH, FL 33060 USTitle: ( ) 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: APOSTLE, DR. ALEX L. JENKINS

PRES

12/01/2004

Electronic Signature of Signing Officer or Director

Date