

2006 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N03000010143

FILED
Oct 10, 2006
Secretary of State

Entity Name: KIDS HELPING KIDS IN AMERICA, INC.

Current Principal Place of Business:

C/O LIFE SKILLS CENTER - ATLANTIC COM HIGH
2501 SEACREST HIGH
DELRAY BEACH, FL 33444

New Principal Place of Business:

C/O LIFE SKILLS CENTER - ATLANTIC COM HIGH
2501 SEACREST BLVD
DELRAY BEACH, FL 33444

Current Mailing Address:

C/O LIFE SKILLS CENTER - ATLANTIC COM HIGH
2501 SEACREST HIGH
DELRAY BEACH, FL 33444

New Mailing Address:

C/O LIFE SKILLS CENTER - ATLANTIC COM HIGH
2501 SEACREST BLVD
DELRAY BEACH, FL 33444

FEI Number: 20-0414207 **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:

FERRY, MICHELLE
3800 SOUTH CONGRESS
SUITE 11
BOYNTON BEACH, FL 33426 US

Name and Address of New Registered Agent:

FERRY, MICHELLE
2501 SEACREST BLVD
DELRAY BEACH, FL 33444 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: MICHELLE FERRY

10/10/2006

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: FERRY, MICHELLE
Address: 6657 MARBLETREE LANE
City-St-Zip: LAKE WORTH, FL 33467

Title: VTD () Delete
Name: FERRY, JAMES K
Address: 6657 MARBLETREE LANE
City-St-Zip: LAKE WORTH, FL 33467

Title: DS () Delete
Name: LEWIS, JACQUELINE
Address: 1781C SAN JOSE DRIVE
City-St-Zip: DELRAY BEACH, FL 33445

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:

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: MICHELLE FERRY

PRES

10/10/2006

Electronic Signature of Signing Officer or Director

Date