

2006 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N04000003584

FILED
Jul 13, 2006
Secretary of State

Entity Name: LAGEHO COMMUNITY DEVELOPMENT NETWORK, INC.

Current Principal Place of Business:

1085 E 14TH STREET
HIALEAH, FL 33010

New Principal Place of Business:

2800 SOMERSET DRIVE
109
FORT LAUDERDALE, FL 33311

Current Mailing Address:

1085 E 14TH STREET
HIALEAH, FL 33010

New Mailing Address:

P.O. BOX 6055
FORT LAUDERDALE, FL 33310

FEI Number: 42-1624862 **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:

ARMAND, JOHNNY
2800 SOMERSET DRIVE J-109
FT LAUDERDALE, FL 33311 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: JOHNNY ARMAND

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Delete
Name: ARMAND, JOHNNY
Address: 2800 SOMERSET DRIVE J-109
City-St-Zip: FT LAUDERDALE, FL 33311

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

Title: V (X) Delete
Name: GUILLAUME, OSVAL
Address: 441 NE 195TH STREET APT 405
City-St-Zip: MIAMI, FL 33179

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

Title: S () Delete
Name: MOSLEY-MANU, THESDA
Address: 2800 SOMERSET DRIVE STE 109
City-St-Zip: FT LAUDERDALE, FL 33311

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

Title: T () Delete
Name: CHARLES, LESLY A
Address: 1515 NE 135TH STREET
City-St-Zip: MIAMI, FL 33161

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

Title: A (X) Delete
Name: PINEDA, ALFREDO
Address: 90 E 10TH AVENUE
City-St-Zip: HIALEAH, FL 33010

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: JOHNNY ARMAND

P

07/13/2006

Electronic Signature of Signing Officer or Director

Date