

# 2008 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N05000000800

FILED  
Nov 03, 2008  
Secretary of State

**Entity Name:** THE MAGIC BEANS VILLAGE FOUNDATION, INC.

**Current Principal Place of Business:**

1807 102ND STREET NORTH  
LARGO, FL 33773

**New Principal Place of Business:**

470 2ND STREET NORTH  
SUITE C  
SAFETY HARBOR, FL 34695

**Current Mailing Address:**

11807 102ND STREET NORTH  
LARGO, FL 33773

**New Mailing Address:**

470 2ND STREET NORTH  
SUITE C  
SAFETY HARBOR, FL 34695

**FEI Number:**                      **FEI Number Applied For (X)**                      **FEI Number Not Applicable ( )**                      **Certificate of Status Desired ( )**  
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:**

YOUNG, ELIZABETH  
415 POINSETTIA ROAD  
BELLEAIR, FL 33756    US

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

JODY, LEWIS  
47- 2ND STREET NORTH  
SUITE C  
SAFETY HARBOR, FL 34695    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: JODY LEWIS

11/03/2008

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD                      ( ) Delete  
Name: YOUNG, ELIZABETH  
Address: 415 POINSETTIA ROAD  
City-St-Zip: BELLEAIR, FL 33756

Title: D                      ( ) Delete  
Name: ALGIERE, GENA  
Address: 11807 102ND STREET NORTH  
City-St-Zip: LARGO, FL 33773

Title: D                      ( ) Delete  
Name: PATEL, RITA  
Address: 1950 PETERS PLACE  
City-St-Zip: CLEARWATER, FL 33764

Title: D                      ( ) Delete  
Name: BEAN, ERNESTINE  
Address: P.O. BOX 1122  
City-St-Zip: PALM HARBOR, FL 334982

Title: D                      ( ) Delete  
Name: COPE, JILL  
Address: 1188 MANDALAY POINT  
City-St-Zip: CLEARWATER, FL 34682

Title: D                      ( ) Delete  
Name: LAVENDER, CARL  
Address: 5111 66TH STREET NORTH SUITE 200  
City-St-Zip: ST. PETERSBURG, FL 33709

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

Title: PD                      (X) Change ( ) Addition  
Name: PIAZZA, JOHN  
Address: 470 2ND STREET NORTH SUITE C  
City-St-Zip: SAFETY HARBOR, FL 34695

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

Title: D                      (X) Change ( ) Addition  
Name: MASON, JANICE  
Address: 470 2ND STREET NORTH SUITE C  
City-St-Zip: SAFETY HARBOR, FL 34695

Title: D                      (X) Change ( ) Addition  
Name: LAMPERT, HAROLD  
Address: 470 2ND STREET NORTH SUITE C  
City-St-Zip: SAFETY HARBOR, FL 34695

Title: D                      (X) Change ( ) Addition  
Name: LEWIS, JODY  
Address: 470 2ND STREET NORTH SUITE C  
City-St-Zip: SAFETY HARBOR, FL 34695

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

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: JOHN PIAZZA JR

P

11/03/2008

Electronic Signature of Signing Officer or Director

Date