2007 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

FILED
Sep 17, 2007
Secretary of State

DOCUMENT# N05000007951

Entity Name: PRINCESS CUTZ FOUNDATION INC.

Current Principal Place of Business:

PO BOX 612
PALMETTO, FL 34220

New Principal Place of Business:

1020 69TH ST CT EAST
PALMETTO, FL 34221

Current Mailing Address:

PO BOX 612
PALMETTO, FL 34220

New Mailing Address:

FEI Number: 42-1683812 **FEI Number Applied For ( )** **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:

RANDOLPH, SHAUNDA E P
1726 4TH AVE EAST
BRADENTON, FL 34208 US

Name and Address of New Registered Agent:

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: SHAUNDA RANDOLPH

Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: ISOM, ORA M
Address: 1308 56TH AVE DR EAST
City-St-Zip: BRADENTON, FL 34203

Title: D ( ) Delete
Name: MITCHELL, DIANE
Address: PO BOX 612
City-St-Zip: PALMETTO, FL 34220

Title: D ( ) Delete
Name: ISOM, THOMAS
Address: 1308 56TH AVE DR EAST
City-St-Zip: BRADENTON, FL 34203

Title: ( ) Delete
Name:
Address:
City-St-Zip:

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:

Title: D ( ) Change (X) Addition
Name: SHAUNDA RANDOLPH,
Address: P,O BOX 612
City-St-Zip: PALMETTO, FL 34220 US

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: SHAUNDA RANDOLPH D 09/17/2007

Electronic Signature of Signing Officer or Director — Date