

2006 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N05000009154

FILED
Oct 16, 2006
Secretary of State

Entity Name: HURRICANE KATRINA RELIEF FUND, INC.

Current Principal Place of Business:

1314 E LAS OLAS BLVD #219
FT LAUDERDALE, FL 33301

New Principal Place of Business:

Current Mailing Address:

1314 E LAS OLAS BLVD #219
FT LAUDERDALE, FL 33301

New Mailing Address:

FEI Number: 20-3406958 **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:

GARDNER, LAWRENCE
1314 E LAS OLAS BLVD #219
FT LAUDERDALE, FL 33301 US

Name and Address of New Registered Agent:

GARDNER, LAWRENCE A
1314 E LAS OLAS BLVD #219
FT LAUDERDALE, FL 33301 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: LAWRENCE ADAM GARDNER

10/16/2006

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: GARDNER, LAWRENCE
Address: 1314 E LAS OLAS BLVD #219
City-St-Zip: FT LAUDERDALE, FL 33301

Title: D () Delete
Name: PISCOPO, JOHN
Address: 1314 E LAS OLAS BLVD #219
City-St-Zip: FT LAUDERDALE, FL 33301

Title: D () Delete
Name: DATTOLOCO, JOSEPHINE
Address: 1314 E LAS OLAS BLVD #219
City-St-Zip: FT LAUDERDALE, FL 33301

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: MD (X) Change () Addition
Name: GARDNER, LAWRENCE A
Address: 1314 E LAS OLAS BLVD #219
City-St-Zip: FT LAUDERDALE, FL 33301

Title: D (X) Change () Addition
Name: JOHN PISCOPO RESIGNA, TION PENDING
Address: 1314 E LAS OLAS BLVD #219
City-St-Zip: FT LAUDERDALE, FL 33301

Title: D (X) Change () Addition
Name: JOSEPHINE DATTOLOCO, RESIGNATION PE N DING
Address: 1314 E LAS OLAS BLVD #219
City-St-Zip: FT LAUDERDALE, FL 33301

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: LAWRENCE ADAM GARDNER

MD

10/16/2006

Electronic Signature of Signing Officer or Director

Date