2007 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N05000011988

FILED Apr 19, 2007 Secretary of State

Entity Name: BROADVIEW ELEMENTARY PARENT TEACHER ORGANIZATION, INC.

Current Principal Place of Business: New Principal Place of Business:

1800 SW 62 AVENUE NORTH LAUDERDALE, FL 33068

Current Mailing Address: New Mailing Address:

1800 NW 62 AVENUE NORTH LAUDERDALE, FL 33068

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: Name and Address of New Registered Agent:

TRICK, WILLIAM W JR. 1216 EAST ATLANTIC BLVD. SUITE 7 POMPANO BEACH, FL 33060 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: WILLIAM TRICK

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D,P () Delete Title: D,P (X) Change () Addition

 Name:
 PAEZ, JENNIFER R
 Name:
 PAPPAS, KIMBERLEY

 Address:
 4441 NW 61 STREET
 Address:
 412 NW 111 AVENUE

 City-St-Zip:
 FORT LAUDERDALE, FL 33319
 City-St-Zip:
 CORAL SPRINGS, FL 33071

Title: D,S () Delete Title: D (X) Change () Addition

 Name:
 TRICK, PATRICIA M
 Name:
 TRICK, PATRICIA M

 Address:
 4140 NW 9 STREET
 Address:
 4140 NW 9 STREET

City-St-Zip: COCONUT CREEK, FL 33066 City-St-Zip: COCONUT CREEK, FL 33066

 $\label{eq:title: D,T () Delete Title: D,V (X) Change () Addition} Title: D,V (X) Change () Addition$

Name:ELFERS, MARIANNE GName:ELFERS, MARIANNE GAddress:6221 SW 18TH STREETAddress:6221 SW 18TH STREET

City-St-Zip: NORTH LAUDERDALE, FL 33068 City-St-Zip: NORTH LAUDERDALE, FL 33068

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: KIMBERLEY PAPPAS P 04/19/2007