

2006 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N05000012841

FILED
Nov 05, 2006
Secretary of State

Entity Name: THE GLADES YOUTH ENRICHMENT PROGRAM, INC.

Current Principal Place of Business:

642 SW 1ST STREET
BELLE GLADE, FL 33430

New Principal Place of Business:

Current Mailing Address:

642 SW 1ST STREET
BELLE GLADE, FL 33430

New Mailing Address:

FEI Number: 43-2094246 **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:

PICKETT, FRED
642 SW 1ST STREET
BELLE GLADE, FL 33430 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: FRED PICKETT

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: PICKETT, FRED
Address: 642 SW 1ST STREET
City-St-Zip: BELLE GLADE, FL 33430

Title: VP () Delete
Name: TAYLOR, IRIS
Address: 609 S.W. 13TH STREET
City-St-Zip: BELLE GLADE, FL 33430

Title: T () Delete
Name: CLARK, ADRIANNA
Address: 17021 N. BAY ROAD, APT. 1019
City-St-Zip: MIAMI, FL 33160

Title: S () Delete
Name: COLEMAN, WARDELL
Address: 857 S.E. 1ST STREET
City-St-Zip: BELLE GLADE, FL 33430

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: () 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: FRED PICKETT

P

11/05/2006

Electronic Signature of Signing Officer or Director

Date