2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000000711

FILED Aug 19, 2007 Secretary of State

Entity Name: RESTORATIVE JUSTICE OF SOUTH FLORIDA PROJECT, INC.

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

3620 N.W. 194 STREET

MIAMI GARDENS, FL 33056 US

Current Mailing Address: New Mailing Address:

3620 N.W. 194 STREET

MIAMI GARDENS, FL 33056 US

FEI Number: 20-4176174 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: Name and Address of New Registered Agent:

JONES, JACQUELINE

3620 N.W. 194 STREET

MIAMI GARDENS, FL 33056 US

JONES, GEORGE E PRES
3620 N.W. 194 STREET

MIAMI GARDENS, FL 33056 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: GEORGE E. JONES 08/19/2007

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Title:
 PD () Delete
 Title:
 PD (X) Change () Addition

 Name:
 JONES, JACQUELINE
 Name:
 JONES, GEORGE E PRES

 Address:
 3620 N.W. 194 STREET
 Address:
 3620 N.W. 194 STREET

 City-St-Zip:
 MIAMI GARDENS, FL 33056 US
 City-St-Zip:
 MIAMI GARDENS, FL 33056 US

Title: VS () Delete Title: (X) Change () Addition Name: JONES, BRIDGET Name: JONES, BRIDGET S V-PRES Address: 3620 N.W. 194 STREET Address: 3620 N.W. 194 STREET City-St-Zip: MIAMI GARDENS, FL 33056 US City-St-Zip: MIAMI GARDENS, FL 33056 US

Title: () Delete Title: (X) Change () Addition JONES, GEORGE Name: DAUGHTREY, NEWALL J TRES Name: 3620 N.W. 194 STREET 3620 N.W. 194 STREET Address: Address: City-St-Zip: MIAMI GARDENS, FL 33056 US City-St-Zip: MIAMI GARDENS, FL 33056 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: GEORGE E. JONES PRES 08/19/2007