

2011 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N06000001715

FILED
Nov 03, 2011
Secretary of State

Entity Name: CHILDREN WITH A VISION, INC.

Current Principal Place of Business:

3801 N. 15TH STREET
TAMPA, FL 33610

New Principal Place of Business:

824 RIVERBROOK CT. APT. 202
TAMPA, FL 33603

Current Mailing Address:

P.O. BOX 11498
TAMPA, FL 33680

New Mailing Address:

FEI Number: 75-3208855

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LEWIS, TONYA M
3801 N. 15TH STREET
TAMPA, FL 33610 US

Name and Address of New Registered Agent:

LEWIS, TONYA M
824 RIVERBROOK CT. APT. 202
TAMPA, FL 33603 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: MRS. TONYA M. LEWIS

11/03/2011

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P
Name: LEWIS, TONYA M
Address: 824 RIVERBROOK CT. APT. 202
City-St-Zip: TAMPA, FL 33603

Title: VP
Name: PICKETT, KEISHA
Address: 2002 N. LOIS AVE.
City-St-Zip: TAMPA, FL

Title: SEC
Name: WOODSIDE, MARLYIEE S
Address: 1411 E 109 AVE. APT. B
City-St-Zip: TAMPA, FL 33612

Title: TRE
Name: CINDY, NUZZO
Address: 16152 49TH STREET
City-St-Zip: CLEARWATER, FL 33762

Title: ED
Name: DANIELS, CONSTANCE
Address: 220 E. MADISION STREET
City-St-Zip: TAMPA, FL 33602

Title: DIR
Name: OLIVER, SUTTON
Address: 12729 LAKE VISTA DR.
City-St-Zip: GIBSONTON, FL 33534

I hereby 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 all other like empowered.

SIGNATURE: MRS. TONYA M. LEWIS

P

11/03/2011

Electronic Signature of Signing Officer or Director

Date