2008 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N06000002131

Entity Name: CECF WISH FOUNDATION, INC.

FILED Mar 13, 2008 Secretary of State

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Current Principal Place of Business:		New Princ	New Principal Place of Business:	
723 EASTLAWN CELEBRATION				
Current Mailing Address:		New Maili	New Mailing Address:	
723 EASTLAWN CELEBRATION				
FEI Number: 20-43	FEI Number Applied For ()	FEI Number Not Appl	icable () Certificate of Status Desired ()	
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:				
IPPOLITI, JEFFI 723 EASTLAWN CELEBRATION	N DRIVE			
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: JEFFREY IPPOLITO				
_	Electronic Signature of Registered Ag	ent	Date	
OFFICERS AND DIRECTORS:		ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	() Delete	Title: Name: Address: City-St-Zip:	DIR () Change (X) Addition IPPOLITO, JEFFREY 723 EAST LAWN DRIVE CELEBRATION, FL 33747 US	
Title: Name: Address: City-St-Zip:	() Delete	Title: Name: Address: City-St-Zip:	DIR () Change (X) Addition BEANLAND, RICHARD 797 OAK SHADOWS ROAD CELEBRATION, FL 34747 US	
Title: Name: Address: City-St-Zip:	() Delete	Title: Name: Address: City-St-Zip:	DIR () Change (X) Addition ELSON, MAX 1055 BANKS ROSE STREET CELEBRATION, FL 34747 US	
Title: Name: Address: City-St-Zip:	() Delete	Title: Name: Address: City-St-Zip:	DIR () Change (X) Addition IPPOLITO, JAMES 1004 PERIWINLE COURT CELEBRATION, FL 34747 US	
Title: Name: Address: City-St-Zip:	() Delete	Title: Name: Address: City-St-Zip:	DIR () Change (X) Addition ACKLEY, RAJIA 22 WEST MONUMENT AVENUE KISSIMEE, FL 34741 US	
Title: Name: Address: City-St-Zip:	() Delete	Title: Name: Address: City-St-Zip:	DIR () Change (X) Addition PAEDEA, WILLIAM 928 WEST PARK DRIVE CELEBRATION, FL 33747 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: JEFFREY IPPOLITO DIR 03/13/2008