

# 2007 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N06000003476

Entity Name: LITERATE FOR LIFE, INC.

FILED  
Nov 04, 2007  
Secretary of State

## Current Principal Place of Business:

P. O. BOX 570635  
MIAMI, FL 332570635

## New Principal Place of Business:

1745 NW 187 TERRACE  
MIAMI, FL 33056 US

## Current Mailing Address:

P. O. BOX 570635  
MIAMI, FL 332570635

## New Mailing Address:

1745 NW 187 TERRACE  
MIAMI, FL 33056 US

FEI Number: 76-0824160

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

HANKERSON, BRIAN  
9000 SHERIDAN ST., SUITE 101  
HOLLYWOOD, FL 33024 US

## Name and Address of New Registered Agent:

LANGSHAW, MICHELLE  
1745 NW 187 TERRACE  
MIAMI, 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: MICHELLE LANGSHAW

11/04/2007

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: LANGSHAW, MICHELLE  
Address: 1745 NW 187TH TERR.  
City-St-Zip: MIAMI, FL 33056

Title: VD ( ) Delete  
Name: LANGE, WALTER III  
Address: 8362 PINES BLVD., SUITE 239  
City-St-Zip: PEMBROKE PINES, FL 33024

Title: STD ( ) Delete  
Name: BROWN, LISA  
Address: 18003 SW 20TH ST.  
City-St-Zip: MIRAMAR, FL 33029

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: LANGSHAW, MICHELLE  
Address: 1745 NW 187TH TERRACE  
City-St-Zip: MIAMI, FL 33056 US

Title: VD (X) Change ( ) Addition  
Name: LANG, WALTER III  
Address: 8362 PINES BLVD., SUITE 239  
City-St-Zip: PEMBROKE PINES, FL 33024 US

Title: STD (X) Change ( ) Addition  
Name: SHIRLEY, JASON  
Address: 3370 BANKS ROAD #107  
City-St-Zip: FT LAUDERDALE, FL 33063 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: MICHELLE LANGSHAW

PD

11/04/2007

Electronic Signature of Signing Officer or Director

Date