

2009 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N06000006293

FILED
Aug 12, 2009
Secretary of State

Entity Name: HAITI COMFORT, INC.

Current Principal Place of Business:

6950 NW 51ST ST
MIAMI, FL 33166

New Principal Place of Business:

2209-E LARK CIRCLE EAST
PALM HARBOR, FL 34684

Current Mailing Address:

6950 NW 51ST ST
MIAMI, FL 33166

New Mailing Address:

P.O. BOX 384
EDISTO ISLAND, SC 29438

FEI Number: 20-4540466

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BUSINESS FILINGS INCORPORATED
1203 GOVERNOR'S SQUARE BLVD
SUITE 101
TALLAHASSEE, FL 323012960 US

Name and Address of New Registered Agent:

BUSINESS FILINGS INCORPORATED
1203 GOVERNORS SQUARE BLVD,
SUITE 101
TALLAHASSEE, FL 323012960 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: MARK WILLIAMS, A.V.P.

08/12/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DT () Delete
Name: PERHAM, JUDY
Address: PO BOX 2214
City-St-Zip: ELIZABETHTON, TN 376442214

Title: D () Delete
Name: COMFORT, TRISHA
Address: 6950 NW 51ST ST #352
City-St-Zip: MIAMI, FL 33166

Title: D () Delete
Name: COMFORT, RAY
Address: 6950 NW 51ST ST #352
City-St-Zip: MIAMI, FL 33166

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DT (X) Change () Addition
Name: COMFORT, TRISHA
Address: % LYNX AIR INTERNATIONAL PMB, PO BOX 40713
City-St-Zip: FT LAUDERDALE, FL 333407139 US

Title: P (X) Change () Addition
Name: MOORE, SHEILA
Address: 1402 ROGERS CT
City-St-Zip: NEENAH, WI 54956 US

Title: VP (X) Change () Addition
Name: KAISER, MICHAEL
Address: PO BOX 322
City-St-Zip: EDISTO ISLAND, SC 29438 US

Title: S () Change (X) Addition
Name: COMFORT, RAY
Address: % LYNX AIR INTERNATIONAL PMB, PO BOX 40713
City-St-Zip: FT LAUDERDALE, FL 333407139 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: SHEILA MOORE

P

08/12/2009

Electronic Signature of Signing Officer or Director

Date