

2008 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N06000011144

FILED
Jan 25, 2008
Secretary of State

Entity Name: BARBARA GORDON LEUKEMIA BONE MARROW AWARENESS, INC

Current Principal Place of Business:

15216 SW 164TH STREET
MIAMI, FL 33187

New Principal Place of Business:

Current Mailing Address:

15216 SW 164TH STREET
MIAMI, FL 33187

New Mailing Address:

2270 NE 37TH ROAD
HOMESTEAD, FL 33033

FEI Number: 20-5777983 **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:

CHANG, CARMEN
2270 NE 37TH ROAD
HOMESTEAD, FL 33033 US

Name and Address of New Registered Agent:

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: CARMEN CHANG

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: GORDON, BARBARA
Address: 15216 SW 164TH STREET
City-St-Zip: MIAMI, FL 33187

Title: VT () Delete
Name: CHANG, CARMEN
Address: 2270 NE 37TH ROAD
City-St-Zip: HOMESTEAD, FL 33033

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

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

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

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: S () Change (X) Addition
Name: FEANNY, LORNA
Address: 11543 SW 133 PLACE
City-St-Zip: MIAMI, FL 33186

Title: D () Change (X) Addition
Name: PARCHMENT, YVONNE
Address: 12291 SW 144 TERRACE
City-St-Zip: MIAMI, FL 33186

Title: D () Change (X) Addition
Name: HENRY, RUBY
Address: 11831 SW 92 LANE
City-St-Zip: MIAMI, FL 33186

Title: D () Change (X) Addition
Name: HERROD, MICHAEL
Address: 5386 NW 184 STREET
City-St-Zip: MIAMI, FL 33055

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: BARBARA GORDON

P

01/25/2008

Electronic Signature of Signing Officer or Director

Date