

**2007 NOT-FOR-PROFIT CORPORATION REINSTATEMENT**

**FILED  
Oct 18, 2007  
Secretary of State**

DOCUMENT# N06000011579

Entity Name: ACTIVE CITIZENS FOR CHILDREN, INC.

**Current Principal Place of Business:**

431 EAST AVENIDA DEL RIO  
CLEWISTON, FL 33440

**New Principal Place of Business:**

1021 CARRIBEAN AVE  
CLEWISTON, FL 33440

**Current Mailing Address:**

431 EAST AVENIDA DEL RIO  
CLEWISTON, FL 33440

**New Mailing Address:**

1021 CARRIBEAN AVE  
CLEWISTON, FL 33440

FEI Number: 20-5872557      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:**

HUSSEY, ALISON C  
4365 SOUTH DEL PRADO BOULEVARD  
CAPE CORAL, FL 33910 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: ALISON C. HUSSEY

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: SANCHEZ, CANDACE  
Address: 1021 CARRIBEAN AVE  
City-St-Zip: CLEWISTON, FL 33440

Title: VD ( ) Delete  
Name: GARCIA, ELIZABETH  
Address: 431 EAST AVENIDA DEL RIO  
City-St-Zip: CLEWISTON, FL 33440

Title: D ( ) Delete  
Name: WEISS, JAMI  
Address: 829 ALLEN ROAD  
City-St-Zip: CLEWISTON, FL 33440

Title: S ( ) Delete  
Name: WEISS, JAMIE  
Address: 431 EAST AVENIDA DEL RIO  
City-St-Zip: CLEWISTON, FL 33440

Title: TD ( ) Delete  
Name: VALLEJO, HEATHER  
Address: 916 POPASH CIRCLE  
City-St-Zip: CLEWISTON, FL 33440

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

Title: VD (X) Change ( ) Addition  
Name: SANCHEZ, CANDACE  
Address: 1021 CARRIBEAN AVE  
City-St-Zip: CLEWISTON, FL 33440

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

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

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

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: CANDACE SANCHEZ

PD

10/18/2007

Electronic Signature of Signing Officer or Director

Date