2008 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

SIGNATURE:

Blogs

954-649-201

SECRETARY OF STATE DIVISION OF CORPORATIONS FILEU DOCUMENT # N07000011479 1. Entity Name NORTH BROWARD - PSTA, INC. 00 DEC 19 AM 8: 18 Principal Place of Business Mailing Address 7600 LYONS ROAD 17592 MIDDLE LAKE DRIVE COCONUT CREEK, FL 33073 BOCA RATON, FL 33496 2. Principal Place of Business - No P.O. Box # 3. Mailing Address 000 Suite Apt # etc. Suite, Apt. #. etc. 12052008 REIN-NP CR2E099 (1/07) City & State City & State 4. FEI Number Applied For Not Applicable Country Zip \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent CAMILLERI, DEBRALYN 17592 MIDDLE LAKE DRIVE BOCA RATON, FL 33496 Zip Code 330 Springs 8. 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. I am familiar with, and accept the obligations of registered SIGNATURE FILE NOW!!! FEE IS \$61.25 Make check payable to In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. After January 1, 2009, Fee will be \$122.50 Florida Department of State 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. TITLE Delete TITLE Addition CAMILLERI, DEBRALYN NAME Hope Berger NAME 17592 MIDDLE LAKE DRIVE STREET ADDRESS STREET ADDRESS 7121 NW 6510 Terrace CITY-ST-ZIP BOCA RATON, FL 33496 CITY-ST-ZiP 33067 TITLE Delete TITLE ☐ Change Addition hastine Bishop NAME NAME 5008 NW 119th Terrace STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE Addition Patti Tabris 8640 NW 561 NAME NAME NW 56th Street STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP IIITE ☐ Delete TITLE ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE Change ■ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 thustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an partiress, with ell other. If we empowered.

V Janice Schemm 4932 NW 119th Terrace Coral Springs, FL 33076

V Cheryl Cleary 7180 NW 62nd Terrace Parkland, FL 33067

V Kimberly Pinnell -7111 NW 48th Way Coconut Creek, FL 33073

V Tracy Kawa 6285 NW 23rd Road Boca Raton, FL 33434