

2007 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N07156

FILED
Sep 19, 2007
Secretary of State

Entity Name: FAMILY FOUNDATIONS OF NORTHEAST FLORIDA, INC.

Current Principal Place of Business:

1639 ATLANTIC BLVD
JACKSONVILLE, FL 32207

New Principal Place of Business:

Current Mailing Address:

1639 ATLANTIC BLVD
JACKSONVILLE, FL 32207

New Mailing Address:

FEI Number: 59-0768265

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MILAM HOWARD NICANDRI DEES & GILLAM, P.A.
14 EAST BAY ST
JACKSONVILLE, FL 32202 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: ALAN HOWARD, ESQ.

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DC () Delete
Name: BORDELON, SHERYL
Address: 8160 BAYMEADOWS WAY, W STE 310
City-St-Zip: JACKSONVILLE, FL 32256

Title: DT () Delete
Name: CARNLEY, JOE
Address: 11567 SAN JOSE BOULEVARD
City-St-Zip: JACKSONVILLE, FL 32223

Title: DVC () Delete
Name: BAYHI, EDWARD
Address: 13386 INTERNATIONAL PARKWAY
City-St-Zip: JACKSONVILLE, FL 32218

Title: DS () Delete
Name: WESTON, STANLEY
Address: 501 W BAY ST STE 200
City-St-Zip: JACKSONVILLE, FL 32202

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DC (X) Change () Addition
Name: SMITH, STEVEN
Address: 1639 ATLANTIC BLVD
City-St-Zip: JACKSONVILLE, FL 32207

Title: DT (X) Change () Addition
Name: BORDELON, SHERYL
Address: 1639 ATLANTIC BLVD
City-St-Zip: JACKSONVILLE, FL 32207

Title: DVC (X) Change () Addition
Name: OWEN, HEATHER
Address: 1639 ATLANTIC BLVD
City-St-Zip: JACKSONVILLE, FL 32207

Title: DS (X) Change () Addition
Name: TEWEY, ERIC
Address: 1639 ATLANTIC BLVD
City-St-Zip: JACKSONVILLE, FL 32207

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: CHRISTINA W. BLACK

EVP

09/19/2007

Electronic Signature of Signing Officer or Director

Date