

2009 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N08000004592

FILED
Nov 02, 2009
Secretary of State

Entity Name: CHILDREN AND FAMILY MISSION, INC.

Current Principal Place of Business:

1307 SCOTTSDALE ROAD E
WEST PALM BEACH, FL 33417

New Principal Place of Business:

Current Mailing Address:

1307 SCOTTSDALE ROAD E
WEST PALM BEACH, FL 33417

New Mailing Address:

FEI Number: 26-2141664

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JULIEN, ROSE A
1307 SCOTTSDALE ROAD E
WEST PALM BEACH, FL 33417 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: JOEL JULIEN

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: JULIEN, ROSE A
Address: 1307 SCOTTSDALE ROAD E
City-St-Zip: WEST PALM BEACH, FL 33417

Title: SD () Delete
Name: FORTUNAT, GISELE
Address: 1307 SCOTTSDALE ROAD E
City-St-Zip: WEST PALM BEACH, FL 33417

Title: TD () Delete
Name: LYTUS, KEDLIE
Address: 1307 SCOTTSDALE ROAD E
City-St-Zip: WEST PALM BEACH, FL 33417

Title: D () Delete
Name: PAUL, MARIE LOURDES
Address: 1307 SCOTTSDALE ROAD E
City-St-Zip: WEST PALM BEACH, FL 33417

Title: D () Delete
Name: ETIENNE, JULIENNE
Address: 1307 SCOTTSDALE ROAD E
City-St-Zip: WEST PALM BEACH, FL 33417

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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: ROSE ANNE JULIEN

PD

11/02/2009

Electronic Signature of Signing Officer or Director

Date