2007 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N13927

FILED Jun 28, 2007 Secretary of State

Entity Name: PARENTS WITHOUT PARTNERS INC. CHAPTER 545, GULF SHORE CHAPTER

Current Principal Place of Business:		New Principal Place of Business:			
P O BOX 60935 FT MYERS, FL 339060935 US		5331 SUMMERLIN ROAD			
		01 FT MYERS	, FL 33919	US	
Current Mai	ling Address:	New Mailing Address:			
P O BOX 609	335	5331 SLIMI	5331 SUMMERLIN ROAD		
FT MYERS, FL 339060935 US		01			
		FIMYERS	, FL 33919	US	
FEI Number: 23-7178722 FEI Number Applied For () FEI Num In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the			nber Not Applicable () Certificate of Status Desired () he prior notice.		
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:					
FORTON, BE 18541 ORIOL FORT MYER		FORTON, BETTY 5331 SUMMERLIN RD 01			
TOKY WILKO, TE GOOTE GO		FORT MYERS, FL 33919 US			
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: BETTY FORTON			06/28/2007		
	Electronic Signature of Registered Agent	Date			
OFFICERS A	AND DIRECTORS:	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Name: F Address: 1	O () Delete FORTON, BETTY 18541 ORIOLE RD FORT MYERS, FL 33912	Title: Name: Address: City-St-Zip:	P (X) FORTON, BETT 5331 SUMMERL FORT MYERS, F	IN RD. 01	
Name: [Address: 1	/P () Delete DONOVAN, JAMES 1316 SOUTHWEST 42ND STREET CAPE CORAL, FL 33904	Title: Name: Address: City-St-Zip:	()	Change () Addition	
Name: C Address: 1	SD () Delete GYURE, JOYCE 14531 GRANDE COY CIR #3002 FORT MYERS, FL 33908	Title: Name: Address: City-St-Zip:	()	Change () Addition	
Name: C Address: 3	/PM () Delete CHRISTOPHER, ROSE 3715 SE 2ND AVE CAPE CORAL, FL 33904	Title: Name: Address: City-St-Zip:	()	Change () Addition	

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: BETTY FORTON P 06/28/2007