## 2008 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

## FILED **DOCUMENT # N46323** 08 DEC 30 PM 1: 24 PARENTS INVOLVED IN EDUCATION, INC. SECRETARY OF STATE Principal Place of Business Mailing Address GIFFORD YOUTH ACTIVITY CENTER 4635 39 AVENUE 4855 43RD AVE. VERO BEACH, FL 32967 US VERO BEACH, FL 32967 2. Principal Place of Business - No P.O. Box # 3. Mailing Address 101 Harris Suite, Apt. #, etc Suite. Apt. #, etc 12302008 REIN-NP CR2E099 (1/07) City & State 4. FEI Number 59-3146886 City & State Applied For Sebastian Not Applicable Country Zip Country \$8.75 Additional 5. Certificate of Status Desired и.S.A Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent licent Pullian WILLIAMS, TERRY R **4635 39TH AVENUE** Street Address (§ O. Box Number is Not Acceptable) VERO BEACH, FL 32967 Sebastian Sebastian Zip Code 32958 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 agent. SIGNATURE of registered agent and little if applicable (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$61.25 In accordance with s. 607.193(2)(b), F.S., the Make check payable to After January 1, 2009, Fee will be \$122.50 corporation did not receive the prior notice. Florida Department of State 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. TITLE Delete TITLE Addition Millicent E. Henry-Pulliam NAME WILLIAMS, TERRY R NAME STREET ADDRESS **4635 39TH AVENUE** Harris STREET ADDRESS tot Drive CITY-ST-ZIP VERO BEACH, FL 32967 3295**X** CITY-ST-ZIP TITLE Delete TITLE Addition HENRY-PULLIAM, MILLICENT E NAME NAME Powell Annie STREET ADDRESS 101 HARRIS DRIVE STREET ADDRESS 4604 304 Auc. SEBASTIAN, FL 32958 CITY-ST-ZIP CITY-ST-ZIP Veno Beach TITLE Delete TITLE ☐ Change Addition NAME PERRY, HELEN NAME 900139368609 STREET ADDRESS 4615 43 AVENUE STREET ADDRESS 12/30/08--01045--015 \*\*61.25 CITY-ST-ZIF VERO BEACH, FL 32967 CITY-ST-ZIP TITLE Delete TITLE ☐ Change NAME POWELL, ANNIE L NAME 4606 30TH AVE. STREET ADDRESS STREET ADDRESS CITY-ST-ZIP VERO BEACH, FL CITY-ST-ZIP TITLE Delete TITLE ☐ Change ☐ Addition SCOFIELD, VERONICA NAME NAME STREET ADDRESS 4218 34 AVENUE STREET ADDRESS CITY-ST-ZIP VERO BEACH, FL 32967 CITY-ST-ZIP TITLE Delete TITLE ☐ Addition ☐ Change PINKNEY, RACHEL NAME NAME STREET ADDRESS 2820 41ST ST. STREET ADDRESS CITY-ST-ZIP VERO BEACH, FL 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 trustee 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 attachn int with an address, with all other like empowered

Millicent Pullian

30/04

TORE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

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