2004 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N95000001254

FILED Oct 25, 2004 Secretary of State

Entity Name: FOUNDATION FOR JACOBSON RESONANCE, INC.

Surrent P	rincipal Place of Busines	s: New Principal Place of	Business:
	IER LANE TON, FL 33433 US		
urrent N	lailing Address:	New Mailing Address:	
	IER LANE TON, FL 33433 US		
n accordan	ce with s. 607.193(2)(b), F.S ., th	Applied For () FEI Number Not Applicable () e corporation did not receive the prior notice.	Certificate of Status Desired ()
iame and	I Address of Current Regi	stered Agent: Name and Address of I	New Registered Agent:
ROSSM	ANL LIADVEV		
	NER LANE TON, FL 33433 US		
he above	NER LANE TON, FL 33433 US e named entity submits this e e of Florida.	statement for the purpose of changing its registered o	office or registered agent, or both,
he above	NER LANE TON, FL 33433 US e named entity submits this e e of Florida.		office or registered agent, or both, Date
BOCA RA The above on the State	NER LANE TON, FL 33433 US e named entity submits this : e of Florida. RE:	of Registered Agent	
BOCA RA The above on the State	NER LANE TON, FL 33433 US e named entity submits this e e of Florida. RE: Electronic Signature	of Registered Agent ADDITIONS/CHANGES	Date
he above the above the State SIGNATUI DFFICER: ittle: lame: ddress:	NER LANE TON, FL 33433 US e named entity submits this se of Florida. RE: Electronic Signature S AND DIRECTORS: PD () Delete GROSSMAN, HARVEY 8137 MIZNER LANE	of Registered Agent ADDITIONS/CHANGES Title: (Name: Address: City-St-Zip:	Date TO OFFICERS AND DIRECTOR

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: HARVEY GROSSMAN PRES 10/25/2004