

2009 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N98000005060

FILED
Oct 19, 2009
Secretary of State

Entity Name: FRIENDS OF OUR HOUSE, INC.

Current Principal Place of Business:

408 NE 4TH ST
FT LAUDERDALE, FL 33301

New Principal Place of Business:

Current Mailing Address:

408 NE 4TH ST
FT LAUDERDALE, FL 33301

New Mailing Address:

FEI Number: 65-0941094

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SMALL, PAULA
408 NE 4TH ST
FT LAUDERDALE, FL 33301 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: PAULA SMALL

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: SMALL, PAULA
Address: 3021 NE 55TH PLACE
City-St-Zip: FORT LAUDERDALE, FL 33308

Title: VP () Delete
Name: COPENHAVER, TESSA
Address: 511 SE 5TH AVE #1402
City-St-Zip: FORT LAUDERDALE, FL 33301

Title: T () Delete
Name: PATTERSON, LORI A
Address: PO BOX 22667
City-St-Zip: FORT LAUDERDALE, FL 33335

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:

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: PAULA SMALL

P

10/19/2009

Electronic Signature of Signing Officer or Director

Date