## 2011 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

## DOCUMENT# N98000005343

FILED Mar 11, 2011 Secretary of State

Entity Name: C.L.A.S.S. OF PALM BEACH COUNTY, INC.

Current Principal Place of Business: New Principal Place of Business:

241 NW 9TH AVE

DELRAY BEACH, FL 33444

Current Mailing Address: New Mailing Address:

241 NW 9TH AVE

DELRAY BEACH, FL 33444

FEI Number: 65-0865374 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

CARTER, FRANCES 241 NW 9TH AVE.

DELRAY BEACH, FL 33444 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.

in the otate of Florida.

SIGNATURE: FRANCES CARTER

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

Title: PD

Name: STRAINGE, LAWRENCE JR Address: 312 NW 10TH AVE City-St-Zip: DELRAY BEACH, FL 33444

Title: SD

 Name:
 WHITE, CHARLOTTE

 Address:
 931 SW 20TH CT

 City-St-Zip:
 DELRAY BEACH, FL 33444

Title: TD

Name: KING, LOUISE Address: 222 NW 7TH AVE

City-St-Zip: DELRAY BEACH, FL 33444

Title: [

Name: CARTER, FRANCES Address: 241 NW 9TH AVE

City-St-Zip: DELRAY BEACH, FL 33444

Title: V/D

Name: HOLLIDAY, ERNESTINE Address: 40 NW 9TH AVE

City-St-Zip: DELRAY BEACH, FL 33444

I hereby 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 all other like empowered.

SIGNATURE: FRANCES CARTER DR 03/11/2011