

2004 NOT-FOR-PROFIT CORPORATION

FILED
Aug 09, 2004 8:00 am
Secretary of State

08-09-2004 90002 008 ****61.25

DOCUMENT # N99000001883

1. Entity Name
 FONDATION POUR L'ENFANCE OF AMERICA, INC.



Principal Place of Business
 11780 U.S. HIGHWAY ONE
 SUITE 300
 NORTH PALM BEACH, FL 33408

Mailing Address
 11780 U.S. HIGHWAY ONE
 SUITE 300
 NORTH PALM BEACH, FL 33408

34067393



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

07272004

Chg-NP

CR2E037 (10/03)

City & State

City & State

4. FEI Number

65-0916530

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

FHS CORPORATE SERVICES, INC.
 11780 U.S. HIGHWAY ONE
 SUITE 300
 NORTH PALM BEACH, FL 33408

Name
Gerald L. Principe, Esquire

Street Address (P.O. Box Number is Not Acceptable)

11780 U.S. Highway One, Suite 300

City

North Palm Beach

FL

Zip Code

33408

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

Gerald L. Principe
 Signature, typed or printed name of registered agent and title if applicable.
Gerald L. Principe

(NOTE: Registered Agent signature required when reinstating)

DATE

8-2-04

9. Election Campaign Financing
 Trust Fund Contribution. ☐

\$5.00 May Be
 Added to Fees

Make check payable to
 Florida Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	PD	<input type="checkbox"/> Delete
NAME	FLEMING, JOSEPH M	
STREET ADDRESS	4100 RCA BOULEVARD	
CITY-ST-ZIP	PALM BEACH GARDENS, FL 33410	
TITLE	VPD	<input type="checkbox"/> Delete
NAME	GRANDPIERRE, GEORGIANA	
STREET ADDRESS	33 RUE NICOLLO	
CITY-ST-ZIP	75017 PARIS, FRANCE,	
TITLE	TD	<input type="checkbox"/> Delete
NAME	FLEMING, JOSEPH M	
STREET ADDRESS	4100 RCA BOULEVARD	
CITY-ST-ZIP	PALM BEACH GARDENS, FL 33410	
TITLE	SD	<input type="checkbox"/> Delete
NAME	PRINCIPE, GERALD.L	
STREET ADDRESS	11780 U.S. HIGHWAY ONE SUITE 300	
CITY-ST-ZIP	NORTH PALM BEACH, FL 33408	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	14 Sheldrake Lane
CITY-ST-ZIP	Palm Beach Gardens, FL 33418
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	14 Sheldrake Lane
CITY-ST-ZIP	Palm Beach Gardens, FL 33418
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

12. I hereby certify that the information supplied with this filing does not qualify 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 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 attachment with an address, with all other like empowered.

SIGNATURE:

Gerald L. Principe, Dir.

8-2-04

561-627-8100