

2008 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P06000139085

Entity Name: TOTS, TODDLERS & TEENS, INC.

FILED
Nov 13, 2008
Secretary of State

Current Principal Place of Business:

6113 NORWOOD AVENUE
JACKSONVILLE, FL 32218 US

New Principal Place of Business:

5751 N. MAIN STREET #208
JACKSONVILLE, FL 32208 US

Current Mailing Address:

11756 CHERRY BARK DRIVE E AST
JACKSONVILLE, FL 32218 US

New Mailing Address:

221 E. 8TH STREET
JACKSONVILLE, FL 32205 US

FEI Number: 20-5821060

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SMILEY, JOHNNY F
11756 CHERRY ABRK DRIVE E AST
JACKSONVILLE, FL 32218 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: JOHNNY SMILEY

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: SMILEY, JOHNNY F
Address: 11756 CHERRY BARK DRIVE EAST
City-St-Zip: JACKSONVILLE, FL 32218 US

Title: T () Delete
Name: SMILEY, COURTNEY D
Address: 11756 CHERRY BARK DRIVE EAST
City-St-Zip: JACKSONVILLE, FL 32218 US

Title: VP () Delete
Name: SMILEY, MATTHEW D
Address: 11756 CHERRY BARK DRIVE EAST
City-St-Zip: JACKSONVILLE, FL 32218 US

Title: S () Delete
Name: SMILEY, CANDACE J
Address: 11756 CHERRY BARK DRIVE EAST
City-St-Zip: JACKSONVILLE, FL 32218 US

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VP (X) Change () Addition
Name: SMILEY, KAREN L
Address: 11756 CHERRY BARK DRIVE EAST
City-St-Zip: JACKSONVILLE, FL 32218 US

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: MBR () Change (X) Addition
Name: SHABAZZ, TRACEY
Address: 11756 CHERRY BARK DR EAST
City-St-Zip: JACKSONVILLE, FL 32218 US

Title: MBR () Change (X) Addition
Name: GREEN, GUYLA
Address: 11756 CHERRY BARK DRIVE E
City-St-Zip: JACKSONVILLE, FL 32218 US

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JOHNNY SMILEY

Electronic Signature of Signing Officer or Director

PRES

11/13/2008

Date