

**2016 FLORIDA NOT FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# N13000006090

**FILED**  
**Mar 27, 2016**  
**Secretary of State**  
**CR9359985101**

**Entity Name:** ADVOCATES FOR CITIZENS ASSISTANCE INC

**Current Principal Place of Business:**

2300 N.W. 22ND STREET  
FT. LAUDERDALE, FL 33311

**Current Mailing Address:**

P.O. BOX 5466  
FT. LAUDERDALE, FL 33310

**FEI Number: 46-5243541**

**Certificate of Status Desired: Yes**

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

MCCORMICK, ANGELA  
7931 N.W. 44TH COURT  
LAUDERHILL, FL 33351 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.*

**SIGNATURE:** ANGELA MCCORMICK RA

03/27/2016

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title P  
Name FOULKS, SANDRA  
Address 2849 SW 10TH STREET  
City-State-Zip: FT. LAUDERDALE FL 33312

Title DIR  
Name MCCORMICK, ESTHER  
Address 8221 N.W. 51ST COURT  
City-State-Zip: LAUDERHILL FL 33351

Title DIR  
Name ROBINSON, RODNEY  
Address 1125 N.W. 5TH AVENUE  
City-State-Zip: FT. LAUDERDALE FL 33311

Title DIR  
Name SHAMIKA, ALLEN  
Address 5471 N.W. 93RD TERRACE  
City-State-Zip: LAUDERHILL FL 33351

Title TREA  
Name MCCORMICK, ANGELA  
Address 7931 N.W. 44TH COURT  
City-State-Zip: LAUDERHILL FL 33351

*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:** SANDRA FOULKS

**PRESIDENT**

03/27/2016

Electronic Signature of Signing Officer/Director Detail

Date