2021 FOREIGN NOT FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# F10000005374

Entity Name: BUILDERS OF THE HIGHWAY FOUNDATION, INC.

Current Principal Place of Business:

418 NW 8 TH ST MIAMI, FL 33136

Current Mailing Address:

P.O. BOX 555115 ORLANDO, FL 32855 US

FEI Number: 27-3376275

Name and Address of Current Registered Agent:

BROWN, TAMELA P 418 NW 8 TH ST MIAMI , FL 33136 US Certificate of Status Desired: Yes

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: TAMELA BROWN						
	Electronic Signature of Registered Agent		Date			
Officer/Director Detail :						
Title	PRESIDENT	Title	VP			
Name	BROWN, TAMELA	Name	LEWIS, BRIAN			
Address	1701 SAINT ANTHONY STREET	Address	1701 SAINT ANTHONY STREET			
City-State-Zip:	NEW ORLEANS LA 70116	City-State-Zip:	NEW ORLEANS LA 70116			
Title	S	Title	ASST. SECRETARY			
Name	RHODES, DARRYL	Name	HOWELL, LISA M			
Address	418 NW 8TH ST.	Address	418 NW 8TH ST			
City-State-Zip:	MIAMI FL 33136	City-State-Zip:	MIAMI FL 33136			
Title	TREASURER	Title	TRUSTEE			
Name	GREEN, DAN JR.	Name	RUSS, MARK			
Address	1795 NW 155TH ST	Address	PO 555115 BOX			
City-State-Zip:	MIAMI GARDENS FL 33054	City-State-Zip:	ORLANDO FL 32855			
Title	TRUSTEE	Title	TRUSTEE			
Name	SCOTT, TYRONE	Name	YISRAEL, LUD			
Address	PO BOX 555115	Address	1701 SAINT ANTHONY STREET			
City-State-Zip:	ORLANDO FL 32855	City-State-Zip:	NEW ORLEANS LA 70116			

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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: TAMELA BROWN

PRESIDENT

11/29/2021

Electronic Signature of Signing Officer/Director Detail

FILED Nov 29, 2021 Secretary of State 1244189745CR

Officer/Director Detail Continued :

Title	DIRECTOR	Title	DIRECTOR
Name	EDWARDS, BARBARA	Name	JENKINS, EDDIE L
Address	4604 49TH STREET NORTH SUITE 1088	Address	1133 W. 26TH COURT
City-State-Zip:	ST. PETERSBURG FL 33709	City-State-Zip:	RIVIERA BEACH FL 33404