

2009 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# 715680

FILED
Nov 06, 2009
Secretary of State

Entity Name: NORTHWEST ORANGE COUNTY IMPROVEMENT ASSOCIATION, INC.

Current Principal Place of Business:

4253 PONCAN ROAD
ZELLWOOD, FL 327987786

New Principal Place of Business:

4253 PONCAN ROAD
ZELLWOOD, FL 327987786

Current Mailing Address:

P.O. BOX 786
ZELLWOOD, FL 327987786

New Mailing Address:

FEI Number: 59-2022527 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HALLORAN, BEVERLY F
6520 SWAIN ROAD
SORRENTO, FL 32776 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: BEVERLY F HALLORAN

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: VP () Delete
Name: BARRETT, MARVIN
Address: 5051 PALM DR
City-St-Zip: ZELLWOOD, FL 32798

Title: TD () Delete
Name: MILLER, ELLEN
Address: 222 N KELLY PARK RD
City-St-Zip: APOPKA, FL 32712

Title: P () Delete
Name: HALLORAN, BEVERLY
Address: 6520 SWAIN ROAD
City-St-Zip: SORRENTO, FL 32776

Title: BD () Delete
Name: SMITH, TERI
Address: 1258 ADIRONDACK
City-St-Zip: APOPKA, FL 32712

Title: BD () Delete
Name: BIRKO, DAVID
Address: 2829 JUNCTION RD
City-St-Zip: ZELLWOOD, FL 32798

Title: SEC () Delete
Name: ODOM, FAYE
Address: P O BOX 279
City-St-Zip: PLYMOUTH, FL 32768

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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Name:
Address:
City-St-Zip:

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Address:
City-St-Zip:

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

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

SIGNATURE: BEVERLY F HALLORAN

Electronic Signature of Signing Officer or Director

PRES

11/06/2009

Date