

2010 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N01000002323

FILED
Sep 28, 2010
Secretary of State

Entity Name: CENTRAL FLORIDA FOUNDATION FOR A DRUG-FREE COMMUNITY, INC.

Current Principal Place of Business:

3670 MAGUIRE BOULEVARD
SUITE 200
ORLANDO, FL 32803

New Principal Place of Business:

Current Mailing Address:

PO BOX 538350
ORLANDO, FL 32853

New Mailing Address:

FEI Number: 59-3760157 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

GOLDSTEIN, JOSEPH I
201 S ORANGE AVE, SUITE 1100
ORLANDO, FL 32801 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: JOSEPH I GOLDSTEIN

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD
Name: JACOBS, RICHARD
Address: 3670 MAGUIRE BOULEVARD, SUITE 200
City-St-Zip: ORLANDO, FL 328538350

Title: D
Name: GOLDSTEIN, JOSEPH I
Address: 201 S ORANGE AVE, SUITE 1100
City-St-Zip: ORLANDO, FL 32801

Title: S
Name: SMITH, BETH
Address: 444 EAST MICHIGAN STREET
City-St-Zip: ORLANDO, FL 32806

Title: VP
Name: DAVES, RICHARD
Address: 3670 MAGUIRE BLVD
City-St-Zip: ORLANDO, FL 32803

Title: C
Name: FEULNER, DONALD
Address: 1150 CARMEL CIRCLE, APT 303
City-St-Zip: CASSELBERRY, FL 32707

Title: T
Name: GRANT, THOMAS N
Address: 201 SOUTH ORANGE AVENUE, STE 1350
City-St-Zip: ORLANDO, FL 32801

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: RICHARD DAVES

VP

09/28/2010

Electronic Signature of Signing Officer or Director

Date