2009 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N08000004458

FILED Nov 03, 2009 Secretary of State

Entity Name: G.O.D GRAPHICS FOUNDATION INCORPORATED

Current Principal Place of Business: New Principal Place of Business:

600 CANNON RIDGE DR. 600 CANNON RIDGE DR.

1912 1912

ORLANDO, FLORIDA, ORLANDO, FLORIDA, FL 32818 US

Current Mailing Address: New Mailing Address:

600 CANNON RIDGE DR. 600 CANNON RIDGE DR.

1912 1912

ORLANDO, FLORIDA, 32818 ORLANDO, FLORIDA, FL 32818 US

FEI Number: 77-0715314 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

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

DAVIS, CARLTON C 600 CÁNNON RIDGE DR. 1912 ORLANDO, FL 32818 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: CARLTON DAVIS

OFFICERS AND DIRECTORS:

Date

Electronic Signature of Registered Agent

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change () Addition () Delete

DAVIS, CARLTON C DAVIS, CARLTON C Name: Name: 600 CANNON RIDGE DR. Address: 600 CANNON RIDGE DR. Address: City-St-Zip: ORLANDO, FL 32818 City-St-Zip: ORLANDO, FL 32818 US

Title: () Delete Title: (X) Change () Addition SOMERS, JENNIFER E Name: SOMERS, JENNIFER E Name: Address: Address:

7175 HIAWASSEE OAKS DR 7175 HIAWASSEE OAKS DR City-St-Zip: ORLANDO, FL 32818 City-St-Zip: ORLANDO, FL 32818 US

Title: () Delete Title: (X) Change () Addition

CHAMBERS, LORNA CHAMBERS, LORNA Name: Name: 1318 EAST 2ND AVE Address: Address: 1318 EAST 2ND AVE City-St-Zip: MOUNT DORA, FL 32757 City-St-Zip: MOUNT DORA, FL 32757 US

Title: () Delete Title: (X) Change () Addition

PEAKS, JEFF PEAKS, JEFF Name: Name:

2266 LAKE POINT CIRCLE 2266 LAKE POINT CIRCLE Address: Address: City-St-Zip: LEESBURG, FL 34748 City-St-Zip: LEESBURG, FL 34748 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CARLTON DAVIS Ρ 11/03/2009