

2013 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N10000011834

FILED
Jan 15, 2013
Secretary of State

Entity Name: THE SANCTUARY OF LEVITES, INCORPORATED

Current Principal Place of Business:

122 VISTA VERDI CIRCLE
232
LAKE MARY, FL 32746

New Principal Place of Business:

Current Mailing Address:

122 VISTA VERDI CIRCLE
232
LAKE MARY, FL 32746

New Mailing Address:

FEI Number: **FEI Number Applied For (X)** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

FELTON, JUSTIN R SR.
122 VISTA VERDI CIRCLE
232
LAKE MARY, FL 32746 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: JUSTIN R. FELTON, SR.

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P
Name: FELTON, JUSTIN R SR.
Address: 122 VISTA VERDI CIRCLE #232
City-St-Zip: LAKE MARY, FL 32746 US

Title: VP
Name: FELTON, VONETTA M
Address: 122 VISTA VERDI CIRCLE #232
City-St-Zip: LAKE MARY, FL 32746 US

Title: BOD
Name: WILLIAMS, LAVONDA
Address: 7618 COLEBROOK DRIVE
City-St-Zip: ORLANDO, FL 32818 US

Title: BOD
Name: WILLIAMS, STEPHEN L SR.
Address: 7618 COLEBROOK DRIVE
City-St-Zip: ORLANDO, FL 32818 US

Title: BOD
Name: WILLIAMS, LARRY R
Address: 5284 LONG ROAD
City-St-Zip: ORLANDO, FL 32808 US

Title: BOD
Name: POLK, JOHN X
Address: 5974 LAKE POINTE VILLAGE CIRCLE #111
City-St-Zip: ORLANDO, FL 32822

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: JUSTIN R. FELTON, SR.

PRES

01/15/2013

Electronic Signature of Signing Officer or Director

Date