


2005 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

05 JUN 14 AM 8:06

REINSTATEMENT 04-05

DOCUMENT # N93000004579 1. Entity Name COMMUNITY VOLUNTEER CONTACT CENTER, INC.	
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Principal Place of Business NORTH WOOD VILLAGE 1200 NINTH ST DAYTONA BEACH, FL 32117 US	Mailing Address NORTH WOOD VILLAGE 1200 NINTH ST DAYTONA BEACH, FL 32117 US
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2. Principal Place of Business 837 Mary McLeod Bethune Blvd. Suite, Apt. #, etc.	3. Mailing Address 837 Mary McLeod Bethune Blvd.
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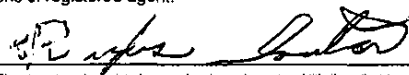
City & State Daytona Beach FL Zip Country 32114 US	City & State Daytona Beach FL Zip Country 32114 US
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 05242005 REIN-NP CR2E099 (6/04)

4. FEI Number 59-3265770	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent SWINTON, RUFUS MR 611 HUDSON ST DAYTONA BEACH, FL 32114	7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code
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8. 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. I am familiar with, and accept the obligations of registered agent.

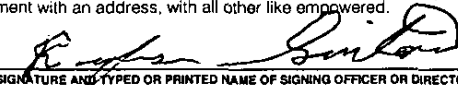
SIGNATURE:  DATE: 6/9/05

(NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$122.50	In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.	Make check payable to Florida Department of State
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE	PT SWINTON, RUFUS	TITLE	
NAME		NAME	
STREET ADDRESS	611 HUDSON ST	STREET ADDRESS	
CITY-ST-ZIP	DAYTONA BEACH, FL 32114	CITY-ST-ZIP	
TITLE	TREASURER	TITLE	
NAME	GARRETT, BERTHA	NAME	
STREET ADDRESS	633 RUSSELL DR	STREET ADDRESS	
CITY-ST-ZIP	DAYTONA BEACH, FL 32114	CITY-ST-ZIP	
TITLE	T	TITLE	PARLIAMENTARIAN
NAME	MAYO, LENARD MR	NAME	MR. LEONARD MAYO
STREET ADDRESS	336 BARTLEY RD	STREET ADDRESS	336 BARTLEY RD.
CITY-ST-ZIP	DAYTONA BEACH, FL 32114	CITY-ST-ZIP	DAYTONA BEACH, FL 32114
TITLE	SECRETARY	TITLE	
NAME	HORNE, LEOLA C	NAME	
STREET ADDRESS	743 MERCEDES AVE	STREET ADDRESS	
CITY-ST-ZIP	DAYTONA BEACH, FL 32114	CITY-ST-ZIP	
TITLE	VICE PRES.	TITLE	VICE PRESIDENT
NAME	BRIGHT, THOMAS JR	NAME	THOMAS BRIGHT, JR.
STREET ADDRESS	2627 BREEZE WIND DR	STREET ADDRESS	2627 BREEZE WIND DR
CITY-ST-ZIP	ORLANDO, FL 32807	CITY-ST-ZIP	ORLANDO, FL 32807
TITLE		TITLE	
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:  DATE: 6/9/05 (386)252-2958

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR