

2004 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

**FILED
Oct 25, 2004
Secretary of State**

DOCUMENT# N97000003045

Entity Name: THE DELTA CULTURAL, EDUCATIONAL, AND SERVICE FOUNDATION, INC.

Current Principal Place of Business:

P O BOX 1402
DELRAY BEACH, FL 33444

New Principal Place of Business:

P O BOX 243825
BOYNTON BEACH, FL 33424

Current Mailing Address:

P O BOX 1402
DELRAY BEACH, FL 33444

New Mailing Address:

P O BOX 243825
BOYNTON BEACH, FL 33424

FEI Number: 31-1561734 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:

GADSON, WANDA G
145 NW 10TH AVE
DELRAY BEACH, FL 33444 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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: JACKSON, JANE P
Address: 436 N.W. 5TH AVENUE
City-St-Zip: BOYNTON BEACH, FL 33435

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

Title: VPD () Delete
Name: DURDEN, BRENDA
Address: 702 CHATELAINE E BLVD
City-St-Zip: DELRAY BCH, FL 33445

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

Title: VPD () Delete
Name: ASBURY, JUDITH
Address: 6209 JAIPUR CT
City-St-Zip: BOYNTON BCH, FL 33437

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

Title: SD () Delete
Name: SMITH, HENRIETTA
Address: 1202 NW 2ND STREET
City-St-Zip: DELRAY BCH, FL 33444

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

Title: TD () Delete
Name: GADSON, WANDA
Address: 145 NW 10TH AVE
City-St-Zip: DELRAY BEACH, FL 33444

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

I hereby certify that the information supplied with this filing does not qualify for the 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 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: WANDA G GADSON

TD

10/25/2004

Electronic Signature of Signing Officer or Director

Date