


2005 Reinstatement

2005 NOT-FOR-PROFIT CORPORATION

APPROVED
AND
FILED

05 NOV 21 AM 6:02

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N98000001962					
1. Entity Name LITERACY VOLUNTEERS OF GADSDEN COUNTY, INC.					
Principal Place of Business 341 E JEFFERSON ST QUINCY, FL 32351		Mailing Address 341 E JEFFERSON ST QUINCY, FL 32351			
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number 59-3502561	
				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			7. Name and Address of New Registered Agent		
ODAHOWSKI, KRIS 341 E JEFFERSON ST QUINCY, FL 32351			Name		
			Street Address (P.O. Box Number is Not Acceptable)		
			City		
			FL Zip Code		
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: <i>Kris Odahowski</i>				DATE: 11/4/05	
Signature, typed or printed name of registered agent and title if applicable.				(NOTE: Registered Agent signature required when reinstating)	
Filing Fee is \$61.25 Due by September 7, 2005		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
				Make check payable to Florida Department of State	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE	PD	<input checked="" type="checkbox"/> Delete	TITLE	President	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	DUPONT, ALICE		NAME	Richard Crutcher	
STREET ADDRESS	404 S STEWART ST		STREET ADDRESS	1014 Atapulgus Hwy	
CITY-ST-ZIP	QUINCY, FL 32351		CITY-ST-ZIP	Quincy, FL 32351	
TITLE	VD	<input checked="" type="checkbox"/> Delete	TITLE	Vice President	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	HARTMAN, ANNA M		NAME	Bea Hopkins	
STREET ADDRESS	155 PARADISE ROAD		STREET ADDRESS	500 Wook King	
CITY-ST-ZIP	HAVANA, FL 32333		CITY-ST-ZIP	Quincy, FL 32351	
TITLE	TD	<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	TILCOCK, RACHAEL		NAME		
STREET ADDRESS	175 HOPKINS LANDING RD		STREET ADDRESS		
CITY-ST-ZIP	QUINCY, FL 32351		CITY-ST-ZIP		
TITLE	D	<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	CROSS, SANDRA		NAME		
STREET ADDRESS	500 FOREST DRIVE		STREET ADDRESS		
CITY-ST-ZIP	QUINCY, FL 32351		CITY-ST-ZIP		
TITLE	SD	<input checked="" type="checkbox"/> Delete	TITLE	Secretary	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	ODAHOWSKI, KRIS		NAME	Catherine Proctor	
STREET ADDRESS	341 E. JEFFERSON STREET		STREET ADDRESS	1611 Stevens St	
CITY-ST-ZIP	QUINCY, FL 32351		CITY-ST-ZIP	Quincy, FL 32351	
TITLE		<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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: <i>Rachael Tilcock</i>		SIGNATURE: <i>Rachael Tilcock</i>		Date: (850) 893-8418	
SIGNATURE: <i>Catherine M. Proctor</i>		SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Daytime Phone #	