## 2008 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

**DOCUMENT# 707340** 

FILED Oct 22, 2008 Secretary of State

Entity Name: THE FLORIDA COUNCIL ON CRIME AND DELINQUENCY, INC.

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

7635 SW 115TH LANE

LAKE BUTLER, FL 32054 US

Current Mailing Address: New Mailing Address:

7635 SW 115TH LANE

LAKE BUTLER, FL 32054 US

FEI Number: 59-1665573 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X)

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:

MECUSKER, DAVID C 7635 SW 115TH LANE

LAKE BUTLER, FL 32054 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: DAVID C. MECUSKER

Electronic Signature of Registered Agent Date

## OFFICERS AND DIRECTORS:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

 Name:
 SOUTHERLAND, KIM
 Name:
 SOUTHERLAND, KIM (CHRIS)

 Address:
 7582 SW 157TH LANE
 Address:
 7582 SW 157TH LANE

 City-St-Zip:
 LAKE BUTLER, FL 32504 US
 City-St-Zip:
 LAKE BUTLER, FL 32504 US

Title: DP ( ) Delete Title: DV (X) Change ( ) Addition Name: WILLIS, MIKE Name: RILEY, CORNITA

 Address:
 P.O. BOX 39
 Address:
 P.O. BOX 4970

 City-St-Zip:
 LAKE BUTLER, FL 32054 US
 City-St-Zip:
 ORLANDO, FL 32802 US

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

 Name:
 RILEY, CORNITA
 Name:
 FINAN, PATRICK R

 Address:
 P.O. BOX 4970
 Address:
 P. O. BOX 126

City-St-Zip: ORLANDO, FL 32802 US City-St-Zip: CHATTAHOCHEE, FL 32324 US

Name: HOISINGTON, PAULA J

Address: 428 BLOXAM AVE

City-St-Zip: CLERMONT, FL 34711 US

Name: KING, JAMES D

Address: 3308 CAPTAINS COVE

City-St-Zip: NAPLES, FL 34112 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: DAVID C. MECUSKER ES 10/22/2008