2009 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# 731767

FILED Oct 09, 2009 Secretary of State

Entity Name: THE FLORIDA COLOMBIA PARTNERS, INC.

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

CAMPUS BOX 8263

RM 216 DAVIS HALL STETSON UNIVERSITY DELAND, FL 32723 US

Current Mailing Address: New Mailing Address:

CAMPUS BOX 8263

RM 216 DAVIS HALL STETSON UNIVERSITY

DELAND, FL 32723 US

FEI Number: 59-1635042 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

SCHORR, JOHN K PHD 2750 OCEAN SHORE BLVD. #3 ORMOND-BY-THE-SEA, FL 32176 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: JOHN K. SCHORR

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VD () Delete Title: CEOD (X) Change () Addition

 Name:
 TRUJILLO, MARCELO
 Name:
 TRUJILLO, MARCELO

 Address:
 3239 SOUTH STREET LUCIE DRIVE
 Address:
 3239 SOUTH STREET LUCIE DRIVE

City-St-Zip: CASSELBERRY, FL 32707 City-St-Zip: CASSELBERRY, FL 32707

Title: VD () Delete Title: PD (X) Change () Addition

 Name:
 GOMEZ, LUZ STELLA
 Name:
 SCHOCH, JOHN

 Address:
 3186 QUAIL DR.
 Address:
 933 PINEAPPLE ROAD

 City-St-Zip:
 DELTONA, FL 32738
 City-St-Zip:
 SOUTH DAYTONA, FL 32119

 $\label{eq:title:pd} \mbox{Title:} \qquad \mbox{VD} \qquad \mbox{() Delete} \qquad \qquad \mbox{Title:} \qquad \mbox{PD} \qquad \mbox{(X) Change () Addition}$

Name:BURRIS-MEYERS, ANITAName:MAHAN, SUEAddress:2105 NORMANDY DRIVEAddress:P.O. BOX 2234

City-St-Zip: MOUNT DORA, FL 32757 City-St-Zip: NEW SMYRNA BEACH, FL 32170

 Name:
 RUIZ, CLEMENCIA
 Name:

 Address:
 2100 N ATLANTIC HANBOUR DRIVE APT P112
 Address:

 City-St-Zip:
 COCOA BEACH, FL 32931
 City-St-Zip:

 Name:
 MCKELLAR, ALISON
 Name:
 SWEN, PATRICAL

 Address:
 1545 SPRING GARDEN RANCH RD.
 Address:
 803 VOORHIS AVE.

 City-St-Zin:
 DELEON SPRINGS EL 32130
 City-St-Zin:
 DELAND EL 32724

City-St-Zip: DELEON SPRINGS, FL 32130 City-St-Zip: DELAND, FL 32724

Title: P () Delete Title: VPD (X) Change

 Title:
 P
 () Delete
 Title:
 VPD
 (X) Change () Addition

 Name:
 SCHORR, JOHN K PH.D.
 Name:
 SCHORR, JOHN K PH.D.

 Address:
 2750 OCEAN SHORE BLVD #3
 Address:
 2750 OCEAN SHORE BLVD #3

 City-St-Zip:
 ORMOND-BY-THE-SEA, FL 32176
 City-St-Zip:
 ORMOND-BY-THE-SEA, FL 32176

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: JOHN K. SCHORR VPD 10/09/2009

Electronic Signature of Signing Officer or Director

Date