

2004 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# 734907

FILED
Oct 25, 2004
Secretary of State**Entity Name:** WEST ORANGE YOUTH CENTER ASSOCIATION, INC.**Current Principal Place of Business:**110 HENDERSON STREET
WINTER GARDEN, FL 34787**New Principal Place of Business:****Current Mailing Address:**P.O. BOX 770925
WINTER GARDEN, FL 347770925**New Mailing Address:**10629 4TH AVE
OCOE, FL 34761**FEI Number:** **FEI Number Applied For ()** **FEI Number Not Applicable (X)** **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:**ANDERSON, RANDY
7734 BRIDGESTONE DRIVE
ORLANDO, FL 32835 US**Name and Address of New Registered Agent:**

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:

Title: DP () Delete
Name: BAKER, HENRY M
Address: 10629 4TH AVENUE
City-St-Zip: OCOEE, FL 34761

Title: DVP () Delete
Name: ANDERSON, RANDY
Address: 7734 BRIDGESTONE DRIVE
City-St-Zip: OCOEE, FL 34761

Title: DVP () Delete
Name: STRICKLAND, DARRELL
Address: 356 E LAFAYETTE STREET
City-St-Zip: WINTER GARDEN, FL 34787

Title: D () Delete
Name: WEED, SHERRI
Address: 128 E NEWELL STREET
City-St-Zip: WINTER GARDEN, FL 34787

Title: DT () Delete
Name: BAKER, CATHERINE A
Address: 10629 4TH AVENUE
City-St-Zip: OCOEE, FL 34761

Title: D () Delete
Name: POCZIK, GLEN
Address: 5450 WESTGATE DRIVE APT 102
City-St-Zip: ORLANDO, FL 32835

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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: HENRY M. BAKER

DP

10/25/2004

Electronic Signature of Signing Officer or Director

Date