2009 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# 746874

Oct 27, 2009 Secretary of State

Entity Name: FLORIDA OCCUPATIONAL PROGRAM COMMITTEE, INCORPORATED

Current Principal Place of Business: New Principal Place of Business: 6269 COCOS DRIVE FORT MYERS, FL 33908 US **Current Mailing Address: New Mailing Address:** 6269 COCOS DRIVE FORT MYERS, FL 33908 US FEI Number: 59-2659718 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: RABAUT, CHARLES P JR BRYAN, JOSEPH 3121 BRÁNDYWINE DRIVE 4493 NORTH OCEAN BLVD US DELRAY BEACH, FL 33483 US TALLAHASSEE, FL 32312 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: JOSEPH BRYAN 10/27/2009 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: DVP () Delete () Change () Addition NAGEL, HAROLD Name: Name: P.O. BOX 311 Address: Address: City-St-Zip: ALTURAS, FL 33820 City-St-Zip: Title: DST Title: () Delete () Change () Addition Name: CORBETT, JULIA Name: Address: 6269 COCOS DR Address: City-St-Zip: FORT MYERS, FL 33908 City-St-Zip: Title: DP () Delete Title: (X) Change () Addition BOHL, GORDON Name: CEASAR, JENNY Name: Address: 8241 S. US 1 Address: 13432 NW 6 DRIBR City-St-Zip: PORT SAINT LUCIE, FL 34952 City-St-Zip: PLANTATION, FL 33325 Title: DT () Delete Title: () Change () Addition Name: LEICHTENGERG, SHARON Name: Address: 882 WOOD CREEK DR Address: City-St-Zip: MELBOURNE, FL 32901 City-St-Zip:

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: JOSEPH BRYAN DP 10/27/2009