2007 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

FILED
Sep 18, 2007
Secretary of State

DOCUMENT# N00000006519

Entity Name: DORSEY-RIVERBEND REVITALIZATION COUNCIL, INC.

Current Principal Place of Business:

1126 SOUTH FEDERAL HWY
PO BOX 379
FT. LAUDERDALE, FL 33316

New Principal Place of Business:

1126 SOUTH FEDERAL HWY
SUITE 379
FT. LAUDERDALE, FL 33316

Current Mailing Address:

1126 SOUTH FEDERAL HWY
PO BOX 379
FT. LAUDERDALE, FL 33316

New Mailing Address:

1126 SOUTH FEDERAL HWY
BOX 379
FT. LAUDERDALE, FL 33316

FEI Number: 65-1135324 **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:

WALTERS, MATT J II
412 NW 18TH AVE
FT. LAUDERDALE, FL 33311 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: MATT WALTERS
Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: WALTERS, MATT J II
Address: 412 NW 18TH AVE.
City-St-Zip: FT. LAUDERDALE, FL 33311

Title: SD ( ) Delete
Name: GOOSBY, MICHELLE
Address: 433 NW 15TH TERR
City-St-Zip: FT. LAUDERDALE, FL 33311

Title: TD ( ) Delete
Name: DAVIES, MARJORIE
Address: 1713 NW 5TH ST
City-St-Zip: FT. LAUDERDALE, FL 33311

Title: D ( ) Delete
Name: SHIRLEY, JASMIN
Address: 1126 S FEDERAL HWY #379
City-St-Zip: FT. LAUDERDALE, FL 33316

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:

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: MATT WALTERS P 09/18/2007
Electronic Signature of Signing Officer or Director — Date