

2004 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N01000002988

FILED
Dec 14, 2004
Secretary of State

Entity Name: CITIZENS FOR EXCELLENT SCHOOLS, INC.

Current Principal Place of Business:

523 NORTH HALIFAX AVENUE
DAYTONA BEACH, FL 32118

New Principal Place of Business:

2150 JOHN ANDERSON DRIVE
ORMOND BEACH, FL 32176

Current Mailing Address:

222 SEABREEZE BLVD
DAYTONA BEACH, FL 32118

New Mailing Address:

2150 JOHN ANDERSON DRIVE
ORMOND BEACH, FL 32176

FEI Number: 59-3714608 **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:

ROSE, JAMES L
222 SEABREEZE BLVD
DAYTONA BEACH, FL 32118 US

Name and Address of New Registered Agent:

HOLMAN, NANCY L
2150 JOHN ANDERSON DRIVE
ORMOND BEACH, 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: NANCY HOLMAN

12/14/2004

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: CD () Delete
Name: HOLMAN, NANCY
Address: 2150 JOHN ANDERSON DR
City-St-Zip: ORMOND BEACH, FL 32176

Title: VCD () Delete
Name: OWENS, SHARON
Address: 63 CREEK BLUFF WAY
City-St-Zip: ORMOND BEACH, FL 32174

Title: TD () Delete
Name: GREGORY, PAULA M
Address: 131 EXECUTIVE CIR #8
City-St-Zip: DAYTONA BEACH, FL 321141180

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:

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: NANCY HOLMAN

CD

12/14/2004

Electronic Signature of Signing Officer or Director

Date