2009 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N01000003927

FILED Mar 26, 2009 Secretary of State

Entity Name: ORANGE COUNTY ARTS FOR A COMPLETE EDUCATION, INC.

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

759 ALTON AVE 11 N SUMERLIN AVE ORLANDO, FL 32804 ORLANDO, FL 32801

Current Mailing Address: New Mailing Address:

759 ALTON AVE 11 N SUMERLIN AVE ORLANDO, FL 32804 265 ORLANDO, FL 32801

FEI Number: 59-3726818 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:

WEBSTER, THEO M EVANS, SCOTT 759 ALTON AVE. 11 N SÜMERLIN AVE ORLANDO, FL 32804 US 265 ORLANDO, FL 32801 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: SCOTT EVANS 03/26/2009

> Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change () Addition () Delete WEBSTER, THEO WINKLER, SANDY Name: Name:

759 ALTON AVE. Address: 800 N MAGNOLIA AVE, SUITE 600 Address: City-St-Zip: ORLANDO, FL 32804 City-St-Zip: ORLANDO, FL 32803

(X) Change () Addition Title: TD Title: () Delete OLSON, TERRY Name: HALL, LAWRIE PLATT Name:

Address: 201 S. ROSALIND Address: 576 S OSCEOLA AVE City-St-Zip: ORLANDO, FL 32801 City-St-Zip: ORLANDO, FL 32801

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

BRETZ, KATY ARKIN, SUSAN Name: Name: 224 N. LAKE CORTEZ DR. Address: Address: 350 WHITE OAK CIR City-St-Zip: APOPKA, FL 32703 City-St-Zip: MAITLAND, FL 32751

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

COLEMAN, JULIE Name: GIDDAY, JANET Name: 311 WEST PRINCETON STREET 412 N PINE HILLS RD Address: Address: City-St-Zip: ORLANDO, FL 32804 City-St-Zip: ORLANDO, FL 32811

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

GOODIER-MOJHER, JUDE STAFFORD, BECKY Name: Name: 2416 NORTH MILLS AVENUE 1355 KELSO BLVD Address: Address: WINDERMERE, FL 34786 City-St-Zip: ORLANDO, FL 32803 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: SANDY WINKLER **PRES** 03/26/2009