

2007 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N01000005308

FILED
Nov 13, 2007
Secretary of State

Entity Name: FLORIDA CRIME AND INTELLIGENCE ANALYST ASSOCIATION, INC.

Current Principal Place of Business:

501 E BAY ST
RM 216H
JACKSONVILLE, FL 32202

New Principal Place of Business:

721 N W 6TH ST
GAINESVILLE, FL 32602

Current Mailing Address:

501 E BAY ST
RM 216H
JACKSONVILLE, FL 32202

New Mailing Address:

721 NW 6TH ST
GAINESVILLE, FL 32602

FEI Number: 59-3736921

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

JACKSON, ERICKA C
721 NW 6TH ST
GAINESVILLE, FL 32602 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: ERICKA C JACKSON

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: TD () Delete
Name: LEWIS, METRE L
Address: 8 N STEWART AVE
City-St-Zip: KISSIMMEE, FL 34741

Title: VD () Delete
Name: FAIRCHILD, JANET
Address: 600 BANYAN BLVD
City-St-Zip: W PALM BEACH, FL 33401

Title: PD (X) Delete
Name: BELLEDIN, STACY
Address: 501 E BAY STREET RM 216H
City-St-Zip: JACKSONVILLE, FL 32202

Title: SD () Delete
Name: JACKSON, ERICKA C
Address: 721 NW 6TH ST
City-St-Zip: GAINESVILLE, FL 32602

Title: VD () Delete
Name: ROLLERSON, CARMANITA
Address: 501 E BAY ST RM 216 H
City-St-Zip: JACKSONVILLE, FL 32202

Title: D () Delete
Name: JOCELYN, TISHIE
Address: 10750 ULMERTON RD
City-St-Zip: LARGO, FL 33778

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:

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: METRE L LEWIS

TD

11/13/2007

Electronic Signature of Signing Officer or Director

Date