2006 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N02000002413

FILED Nov 10, 2006 Secretary of State

Entity Name: LAKE SUMTER SOCIETY FOR HUMAN RESOURCE MANAGEMENT, INC.

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

PO BOX 490003

LEESBURG, FL 347490003

Current Mailing Address: New Mailing Address:

PO BOX 490003

LEESBURG, FL 347490003

FEI Number: 74-3039698 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:

CORPORATE CREATIONS NETWORK INC. BROWN, JR., ARTHUR R ESQ.

941 FOURTH STREET #200 851 N. DONNELLY ST.

MIAMI BEACH, FL 33139 SUITE 6 MT. DORA, FL 32757 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: ARTHUR R. BROWN, JR. ESQ. 11/10/2006

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete (X) Change () Addition

FIELDS, KITTY L FIELDS, KITTY L Name: Name:

PO BOX 490003 Address: PO BOX 490003 Address: City-St-Zip: LEESBURG, FL 347490003 City-St-Zip: LEESBURG, FL 347490003

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

HEBROCK, BERNI Name: HEBROCK, BERNI Name:

Address: PO BOX 49003 Address: PO BOX 49003 LEESBURG, FL 347490003 City-St-Zip: City-St-Zip: LEESBURG, FL 347490003

Title: () Delete Title: 1SVP (X) Change () Addition REARDON, TERRY PINEDA, BONNIE Name: Name:

PO BOX 490003 Address: Address: PO BOX 490003

City-St-Zip: LEESBURG, FL 347490003 City-St-Zip: LEESBURG, FL 347490003

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

Name: CONKLIN, BETTY JO Name: CONKLIN, BETTY JO PO BOX 490003 PO BOX 490003 Address: Address:

City-St-Zip: LEESBURG, FL 347490003 City-St-Zip: LEESBURG, FL 347490003

Title: () Delete Title: (X) Change () Addition KENNEDY, GAIL Name: Name: HOES, DAVID

PO BOX 490003 PO BOX 490003 Address: Address: LEESBURG, FL 347490003 LEESBURG, FL 347490003 City-St-Zip: City-St-Zip:

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

FONTAINE, DEBRA MCADAMS, KASIE Name: Name: Address: PO BOX 490003 Address: PO BOX 490003

LEESBURG, FL 347490003 LEESBURG, FL 347490003 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: BETTY JO CONKLIN Т 11/10/2006