

# **2011 NOT-FOR-PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# N02000009446

**FILED**  
**Mar 22, 2011**  
**Secretary of State**

**Entity Name:** FLORIDA YOUNG DEMOCRATS, INC.

**Current Principal Place of Business:**

P.O. BOX 677102  
ORLANDO, FL 328677102

**New Principal Place of Business:**

200 LESLIE DRIVE  
#404  
HALLANDALE BEACH, FL 33009

**Current Mailing Address:**

P.O. BOX 677102  
ORLANDO, FL 328677102

**New Mailing Address:**

P.O. BOX 4444  
HALLANDALE BEACH, FL 33008

**FEI Number:** 33-1040574

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

KHAN, OMAR  
11130 CRESCENT BAY BLVD.  
CLERMONT, FL 34711 US

**Name and Address of New Registered Agent:**

ALEXANDER, LEWY  
200 LESLIE DRIVE  
#404  
HALLANDALE BEACH, FL 33009 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: ALEXANDER LEWY

03/22/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: LEWY, ALEXANDER  
Address: P.O. BOX 4444  
City-St-Zip: HALLANDALE BEACH, FL 33008

Title: S  
Name: CLARKE, RYAN  
Address: P.O. BOX 4444  
City-St-Zip: HALLANDALE BEACH, FL 33008

Title: VPD  
Name: FENN, JENNIFER  
Address: P.O. BOX 4444  
City-St-Zip: HALLANDALE BEACH, FL 33008

Title: TD  
Name: BARATZ, MATTHEW  
Address: P.O. BOX 4444  
City-St-Zip: HALLANDALE BEACH, FL 33008

I hereby 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 all other like empowered.

SIGNATURE: MATTHEW BARATZ

TD

03/22/2011

Electronic Signature of Signing Officer or Director

Date