

2007 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N03000001153

FILED
Mar 15, 2007
Secretary of State

Entity Name: THE COREY SIMON SUCCESS CENTER, INC.

Current Principal Place of Business:

4623 STRATFORD ROAD
FT WAYNE, IN 46807

New Principal Place of Business:

Current Mailing Address:

4623 STRATFORD ROAD
FT WAYNE, IN 46807

New Mailing Address:

FEI Number: 32-0061186 **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:

SIMON, COREY
9010 WINGED FOOT DR
TALLAHASSEE, FL 32312 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: SHARON TURNER

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: CD () Delete
Name: SIMON, COREY
Address: 4623 STRATFORD ROAD
City-St-Zip: FT WAYNE, IN 46807

Title: D () Delete
Name: SIMON, NATASHA
Address: 4623 STRATFORD ROAD
City-St-Zip: FT WAYNE, IN 46807

Title: DS () Delete
Name: TURNER, SHARON
Address: 4623 STRATFORD ROAD
City-St-Zip: FT WAYNE, IN 46807

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 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: SHARON TURNER

DS

03/15/2007

Electronic Signature of Signing Officer or Director

Date