

2006 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

06 NOV 17 AM 9:52

DOCUMENT # N03000001170

1. Entity Name
ORLANDO REGIONAL CORPORATE VOLUNTEER
COUNCIL, INC.



Principal Place of Business
1000 UNIVERSAL STUDIOS PLAZA
UNIVERSAL ORLANDO
ORLANDO, FL 32819

Mailing Address
P.O. BOX 2009
ORLANDO, FL 32802

REINSTATEMENT 06



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

09252006 REIN-NP CR2E099 (11/05)

City & State

City & State

4. FEI Number
45-0506635

Applied For
Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐ \$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

HUNGATE, VICKIE
500 SOUTH ORANGE AVENUE
ORLANDO, FL 32801

Name
MARIE Pulley

Street Address (P.O. Box Number is Not Acceptable)

1375 BUENA VISTA DRIVE

CITY LAKE BUENA VISTA, FL

Zip Code
32830

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Marie Pulley

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

9/25/06

DATE

FILE NOW!!! FEE IS \$236.25
After January 1, 2007, Fee will be \$297.50

Make check payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE DVP ☐ Delete
NAME BERBERENA, RAQUEL
STREET ADDRESS 14901 SOUTH ORANGE BOSSOM TRAIL
CITY-ST-ZIP ORLANDO, FL 32837

TITLE VD ☐ Change ☒ Addition
NAME KAREN ROSS
STREET ADDRESS 555 LAKE BORDER DR.
CITY-ST-ZIP APOKA, FL 32703

TITLE PD ☒ Delete
NAME HUNGATE, VICKIE
STREET ADDRESS PO BOX 3193
CITY-ST-ZIP ORLANDO, FL 32802

TITLE TD ☐ Change ☒ Addition
NAME MARK PULLEY
STREET ADDRESS PO BOX 10,000
CITY-ST-ZIP LAKE BUENA VISTA, FL 32830

TITLE D ☒ Delete
NAME YOUNG, DIANE
STREET ADDRESS 1000 UNIVERSAL STUDIOS PLAZA
CITY-ST-ZIP ORLANDO, FL 32819

TITLE D ☐ Change ☒ Addition
NAME POLLY TUDELA
STREET ADDRESS 1000 UNIVERSAL STUDIOS PLAZA
CITY-ST-ZIP ORLANDO, FL 32819

TITLE PD ☐ Delete
NAME WATSON, KEVIN
STREET ADDRESS 5601 WINDHOVER DRIVE
CITY-ST-ZIP ORLANDO, FL 32819

TITLE D ☐ Change ☒ Addition
NAME SHANNON GRAMM
STREET ADDRESS 500 SOUTH ORANGE AVE.
CITY-ST-ZIP ORLANDO, FL 32801

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE D ☐ Change ☒ Addition
NAME JAVICE ABLEW
STREET ADDRESS 4803 UNIVERSAL BVD. STE. 500
CITY-ST-ZIP ORLANDO, FL 32819

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Marie Pulley

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

9/25/06

Date

407-828-3216

Daytime Phone #