

2006 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

1052

DOCUMENT # N03000005149 1. Entity Name GET INVOLVED COMMUNITY OUTREACH INC.						FILED 06 JUN 29 AM 7:47 TALLAHASSEE, FLORIDA	
Principal Place of Business 613 HILLSIDE DR LAKE LAND, FL 33803				Mailing Address 613 HILLSIDE DR LAKE LAND, FL 33803			
2. Principal Place of Business Get Involved Outreach Inc. Community Suite, Apt. #, etc. Ste. # P106 City & State Lakeland, Florida Zip 33805		3. Mailing Address 3215 Baird Avenue. Suite, Apt. #, etc. Ste. P106 City & State Lakeland, Florida Zip 33805		 06-21-06 (11/05)		06-21-06 12:50 05-06	
4. FEI Number 51-0438865		Applied For <input type="checkbox"/> Not Applicable		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required			
6. Name and Address of Current Registered Agent COPELAND, JIMMY 613 HILLSIDE DR LAKE LAND, FL 33803				7. Name and Address of New Registered Agent Name Jimmy Copeland Street Address (P.O. Box Number is Not Acceptable) 3215 Baird Avenue Ste. # P106 City Lakeland FL Zip Code 33805			
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 <i>Jimmy D. Copeland</i> - President (NOTE: Registered Agent signature required when reinstating)				DATE 06-21-06			
FILE NOW!!! FEE IS \$122.50		In accordance with s. 607.183(2)(b), F.S., the corporation did not receive the prior notice.		Make check payable to Florida Department of State			
10. OFFICERS AND DIRECTORS				11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ED COPELAND, JIMMY 613 HILLSIDE DR LAKE LAND, FL 33803	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	P Jimmy Copeland 3215 Baird Ave. Ste. # P106 Lakeland, FL. 33805	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P COPELAND, DAISY 613 HILLSIDE DR LAKE LAND, FL 33803	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP Duanne Bradshaw 3215 Baird Ave. Ste. # P106 Lakeland, FL. 33805	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S DANIELS, STEPHANIE 613 HILLSIDE DR LAKE LAND, FL 33803	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	S Patricia Zimmerman 3215 Baird Ave. Ste. # P106 Lakeland, FL. 33805	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D PETERSON, PEGGIE 613 HILLSIDE DRIVE LAKE LAND, FL 33803	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Joyce Sims 3215 Baird Ave. Ste. # P106 Lakeland, FL. 33805	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	M TABETT, CYNTHIN 613 HILLSIDE DR LAKE LAND, FL 33803	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	T Freddie Evans 3215 Baird Ave. Ste. # P106 Lakeland, FL. 33805	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T BRANSHAW, DUANN 613 HILLSIDE DR LAKE LAND, FL 33803	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition		
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: <i>Jimmy D. Copeland</i> - Jimmy D. Copeland				Date 06-21-06		Daytime Phone # (863) 683-7872	

IMPORTANT INSTRUCTIONS

JUN 29 2006
B. Mitchell



3215 BAIRD AVE. SUITE P106 LAKELAND FLA. 33805
(863) 683-7872 E-Mail caringforyou23@aol.com

JUNE 21, 2006

Dear Mr. Gary Blankenbaker:

I am writing on the behalf of GET INVOLVED COMMUNITY OUTREACH Incooperation renstatement .
I am writing to inform you that we did not receive the renewal notice due to change of address.
I apologize for this error. Please accept our explanation.

Respectfully

A handwritten signature in black ink, which appears to be 'Jimmy Copeland', is written in a cursive, flowing style.

Mr. Jimmy Copeland
President