## 2005 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N03000007347

FILED May 09, 2005 Secretary of State

Entity Name: JEFFERSON COUNTY COMMUNITY DEVELOPMENT FINANCIAL INSTITUTION, INC. **Current Principal Place of Business: New Principal Place of Business:** 3784A SILVER STAR RD 1010 E. MEMORIAL BLVD. ORLANDO, FL 32808 LAKELAND, FL 33801 **Current Mailing Address: New Mailing Address:** 3784A SILVER STAR RD P.O. BOX 1148 ORLANDO, FL 32808 MONTICELLO, FL 32345 US FFI Number: FEI Number Applied For (X) FEI Number Not Applicable ( ) Certificate of Status Desired (X) 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: SAPP, WAYNE YOUNG, PHIL 3784A SILVER STAR RD 1976 VISTA VIEW DRIVE ORLANDO, FL 32808 LAKELAND, FL 33813 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: PHIL YOUNG 05/09/2005 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete (X) Change ( ) Addition SAPP, WAYNE HALLER III, HAL Name: Name: 3784A SILVER STAR RD Address: 6330 ASHLEY DRIVE Address: City-St-Zip: ORLANDO, FL 32808 City-St-Zip: LAKELAND, FL 33813 US Title: Title: ( ) Change (X) Addition ( ) Delete Name: Name: DODGE, RAY LYNN Address: Address: 3891 ALAMANDA HILLS PLACE City-St-Zip: City-St-Zip: LAKELAND, FL 33813 US Title: () Delete Title: ( ) Change (X) Addition Name: THE NCT GROUP CPAS,, LLP Name: P. O. BOX 1076 Address: Address: City-St-Zip: City-St-Zip: LAKELAND, FL 33802 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: PHIL YOUNG RA 05/09/2005