2006 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

FILED
Oct 13, 2006
Secretary of State

DOCUMENT# N03000010400

Entity Name: CENTRAL FLORIDA YELLOW JACKETS, INC.

Current Principal Place of Business:

1524 LAMPLIGHTER WAY
ORLANDO, FL 32818

New Principal Place of Business:

Current Mailing Address:

1524 LAMPLIGHTER WAY
ORLANDO, FL 32818

New Mailing Address:

FEI Number: 20-0397244 **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:

WRIGHT, LESTER R
1524 LAMPLIGHTER WAY
ORLANDO, FL 32818 US

Name and Address of New Registered Agent:

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: LESTER WRIGHT
Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: CEO ( ) Delete
Name: WRIGHT, LESTER R
Address: 1524 LAMPLIGHTER WAY
City-St-Zip: ORLANDO, FL 32818

Title: S ( ) Delete
Name: HARDY, JO ANN
Address: 8636 WHITE ROSE
City-St-Zip: ORLANDO, FL 32818

Title: T ( ) Delete
Name: WRIGHT, LINDA B
Address: 1524 LAMPLIGHTER WAY
City-St-Zip: ORLANDO, FL 32818

Title: D ( ) Delete
Name: MCGUIRE, DUANE
Address: 950 ALBERTA ST
City-St-Zip: LONGWOOD, FL 32750

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:

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: LESTER WRIGHT CEO 10/13/2006
Electronic Signature of Signing Officer or Director — Date