2008 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

FILED
Sep 29, 2008
Secretary of State

DOCUMENT# N03000011112

Entity Name: DYANA L. WILLIAMS, THE GUARDIAN, INC.

Current Principal Place of Business:

2612 SILKWOOD CIRCLE
#727
ORLANDO, FL 32818

New Principal Place of Business:

Current Mailing Address:

2612 SILKWOOD CIRCLE
#727
ORLANDO, FL 32818

New Mailing Address:

FEI Number: 54-2124069 **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:

WILLIAMS, DYANA L
2612 SILKWOOD CIRCLE
#727
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: DYANA L.WILLIAMS
Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: ED ( ) Delete
Name: WILLIAMS, DYANA L.
Address: 2612 SILKWOOD CIRLCE
City-St-Zip: ORLANDO, FL 32818

Title: D ( ) Delete
Name: ALI, RONAA
Address: 545 VERN DR.
City-St-Zip: ORLANDO, FL 32805

Title: D ( ) Delete
Name: DUNN, MICHAEL L
Address: 1071 POINT LOOP
City-St-Zip: APOPKA, FL 32712

Title: D ( ) Delete
Name: GARWOOD, ANDREA
Address: P O BOX 560182
City-St-Zip: ORLANDO, FL 32856

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 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: DYANAL.WILLIAMS FOUN 09/29/2008
Electronic Signature of Signing Officer or Director — Date