

2008 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N04000001162

FILED
Oct 30, 2008
Secretary of State

Entity Name: CENTRO DE LA FAMILIA VICTORIOSA, INC.

Current Principal Place of Business:

19050 US HWY. 44TH NORTH
ORANGE LAKE, FL 32861

New Principal Place of Business:

3001 SW COLLEGE ROAD
EWERS CENTURY CENTER-106
OCALA, FL 34474 44

Current Mailing Address:

P. O. BOX 678357
ORLANDO, FL 328678357

New Mailing Address:

FEI Number: 20-0696845 **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:

Name and Address of New Registered Agent:

VILLATORO, OSCAR A
1133 HACKBERRY DR.
ORLANDO, FL 32825 US

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: OSCAR VILLATORO

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: VILLATORO, OSCAR A
Address: 1133 HACKBERRY DR.
City-St-Zip: ORLANDO, FL 32825

Title: TD () Delete
Name: VILLATORO, GRACE E
Address: 1133 HACKBERRY DR.
City-St-Zip: ORLANDO, FL 32825

Title: SD () Delete
Name: TORRES, SALVADOR
Address: 18071 NW 88TH AVE.
City-St-Zip: REDDICK, FL 32686

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: SEC (X) Change () Addition
Name: GUADAMUZ, MYRIAM
Address: 1083 W. CIRCLE CT.
City-St-Zip: WINTER GARDEN, FL 34787

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: OSCAR VILLATORO

PD

10/30/2008

Electronic Signature of Signing Officer or Director

Date