## 2007 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

## DOCUMENT# N04000009609

Entity Name: THE MOVEMENT-CENTRAL FLORIDA, INC.

FILED Mar 15, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

750 S ORANGE BLOSSOM TRAIL 5317 HYDE PARK AVE STE #2 ORLANDO, FL 32808

ORLANDO, FL 32805

Current Mailing Address: New Mailing Address:

750 S ORANGE BLOSSOM TRAIL 5317 HYDE PARK AVE STE 244 ORLANDO, FL 32808

ORLANDO, FL 32805

FEI Number: 20-1147150 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:

JAMES, TANYA

5609 ARUNDEL DRIVER

ORLANDO, FL 32808 US

GROOMES, DARRELL

5317 HYDE PARK AVE

ORLANDO, FL 32808 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: DARELL GROOMES 03/15/2007

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Title:
 P/C ( ) Delete
 Title:
 P/C (X) Change ( ) Addition

 Name:
 NORVELL, BRIDGET M
 Name:
 NORVELL, BRIDGET M CEO

 Address:
 5181 CINDERLANE PARKWAY
 Address:
 5317 HYDE PARK AVE

 City-St-Zip:
 ORLANDO, FL 32808
 City-St-Zip:
 ORLANDO, FL 32808

 Title:
 2-VC
 ( ) Delete
 Title:
 S
 (X) Change ( ) Addition

 Name:
 SMITH, OZZIE
 Name:
 ROBINSON, TANYA

 Address:
 P O BOX 677726
 Address:
 5609 ARNUDEL DRIVE

 Address:
 P O BOX 677726
 Address:
 5609 ARNUDEL DRIVE

 City-St-Zip:
 ORLANDO, FL 32867
 City-St-Zip:
 ORLANDO, FL 32808

Title: S ( ) Delete Title: T (X) Change ( ) Addition

 Name:
 MILTON, BERNARD
 Name:
 ELLIOTT, HOPE

 Address:
 5612 CENTURY 21 BLVD #87
 Address:
 5317 HYDE PARK AVE

 City-St-Zip:
 ORLANDO, FL 32807
 City-St-Zip:
 ORLANDO, FL 32808

Title: T (X) Delete Title: ( ) Change ( ) Addition

 Name:
 JORDAN, JOHN
 Name:

 Address:
 581 CARLISLE DRIVE
 Address:

 City-St-Zip:
 MORRISVILLE, PA 19067
 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: BRIDGET NORVELL CEO 03/15/2007