

2006 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N05000001552

FILED
Oct 08, 2006
Secretary of State

Entity Name: OPPORTUNITY DEVELOPMENT PROPERTIES INC.

Current Principal Place of Business:

% OPPORTUNITY DEVELOPMENT INC.
2709 ART MUSEUM DR
JACKSONVILLE, FL 32207

New Principal Place of Business:

Current Mailing Address:

% OPPORTUNITY DEVELOPMENT INC.
2709 ART MUSEUM DR
JACKSONVILLE, FL 32207

New Mailing Address:

FEI Number: 20-1837352 **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:

MURPHY, JIM
10472 HUNTERS CREEK CT
JACKSONVILLE, FL 32256 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: JIM MURPHY

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: ED () Delete
Name: MOTKO, MATTHEW
Address: 2315 CONCILIATION LN
City-St-Zip: GREEN COVE SPRINGS, FL 32043

Title: P () Delete
Name: POWELL, DANNY
Address: 10233 RISING MIST LN
City-St-Zip: JACKSONVILLE, FL 32221

Title: VP () Delete
Name: MORRIS, R, JOE
Address: 11812 DUNN BRANCH DR WEST
City-St-Zip: JACKSONVILLE, FL 32218

Title: T () Delete
Name: MURPHY, JIM
Address: 10472 HUNTERS CREEK CT
City-St-Zip: JACKSONVILLE, FL 32256

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: PAMELA P WILLIAMS

CFO

10/08/2006

Electronic Signature of Signing Officer or Director

Date