2009 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

FILED
Nov 11, 2009
Secretary of State

DOCUMENT# N05000002460

Entity Name: THE SEDRICK LEVON WASHINGTON FOUNDATION, INC.

Current Principal Place of Business:

271 HILLTOP DRIVE
MIDWAY, FL 32343

New Principal Place of Business:

Current Mailing Address:

P O BOX 180818
TALLAHASSEE, FL 32318

New Mailing Address:

P O BOX 180818
TALLAHASSEE, FL 32318

FEI Number: 57-1223581 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**
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:

GIBSON, ALICIA R VP
271 HILLTOP DRIVE
MIDWAY, FL 32343 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: ALICIA R.L. GIBSON

Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: GIBSON, EDDIE JR
Address: 271 HILLTOP DRIVE
City-St-Zip: MIDWAY, FL 32343

Title: VP ( ) Delete
Name: GIBSON, ALICIA R.L.
Address: 271 HILLTOP DRIVE
City-St-Zip: MIDWAY, FL 32343

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: ALICIA R.L. GIBSON VP 11/11/2009

Electronic Signature of Signing Officer or Director — Date