

2008 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N05000005958

FILED
Mar 25, 2008
Secretary of State

Entity Name: GREATER VOLUSIA YOUNG REPUBLICANS INC.

Current Principal Place of Business:

247 N CRANOR AVE
DELAND, FL 32720 US

New Principal Place of Business:

500 ELCAMINO DRIVE
DELTONA, FL 32738 US

Current Mailing Address:

247 N CRANOR AVE
DELAND, FL 32720 US

New Mailing Address:

500 ELCAMINO DRIVE
DELTONA, FL 32738 US

FEI Number: 05-0000059 **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:

BALDAUFF, DAVID M
247 N CRANOR AVE
DELAND, FL 32720 US

Name and Address of New Registered Agent:

CROCKETT, KATHERINE E
500 ELCAMINO DRIVE
DELTONA, FL 32738 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: KATHERINE E CROCKETT

03/25/2008

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: BALDAUFF, DAVID M
Address: 247 N. CRANOR AVE
City-St-Zip: DELAND, FL 32720

Title: VP () Delete
Name: SPORE, HOUSTON T
Address: 868 TORCHWOOD DR
City-St-Zip: DELAND, FL 32724 US

Title: TREA () Delete
Name: RAMOS, LUIS A III
Address: 3239 NOAH ST.
City-St-Zip: DELTONA, FL 32724 US

Title: SEC (X) Delete
Name: SMITH, JESSICA
Address: 1005 GERYL WAY
City-St-Zip: DELAND, FL 32724 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: CROCKETT, KATHERINE E
Address: 500 ELCAMINO DRIVE
City-St-Zip: DELTONA, FL 32738

Title: VP (X) Change () Addition
Name: THOMPSON, PATRICK
Address: 2 FOX RUN TAIL
City-St-Zip: ORMOND BEACH, FL 32174 US

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: KATHERINE E CROCKETT

PRES

03/25/2008

Electronic Signature of Signing Officer or Director

Date