

# 2009 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N05000010408

FILED  
Oct 14, 2009  
Secretary of State

Entity Name: THE CARSON DELANEY LONG FOUNDATION INC

## Current Principal Place of Business:

400 PARK AVE SOUTH  
STE 150  
WINTER PARK, FL 32789

## New Principal Place of Business:

935 ORANGE AVENUE  
SUITE 102  
WINTER PARK, FL 32789

## Current Mailing Address:

400 PARK AVE SOUTH  
STE 150  
WINTER PARK, FL 32789

## New Mailing Address:

935 ORANGE AVENUE  
SUITE 102  
WINTER PARK, FL 32789

FEI Number: 20-4020691      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:

OMETRIAS D. LONG & ASSOCIATES, P.A.  
% OMETRIAS DEON LONG  
400 PARK AVE SOUTH - STE 150  
WINTER PARK, FL 32789 US

## Name and Address of New Registered Agent:

OMETRIAS D. LONG & ASSOCIATES, P.A.  
% OMETRIAS DEON LONG  
935 ORANGE AVENUE, SUITE 102  
WINTER PARK, FL 32789 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: OMETRIAS DEON LONG

10/14/2009

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: P,D ( ) Delete  
Name: LONG, MONIQUE W  
Address: 1216 WYNDHAM PINE DRIVE  
City-St-Zip: APOPKA, FL 32712

Title: VP,D ( ) Delete  
Name: LONG, OMETRIAS D  
Address: 400 PARK AVENUE SOUTH STE 150  
City-St-Zip: WINTER PARK, FL 32789

Title: S,D ( ) Delete  
Name: WOODS, DARLENE  
Address: 1216 WYNDHAM PINE DRIVE  
City-St-Zip: APOPKA, FL 32712

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VP,D (X) Change ( ) Addition  
Name: LONG, OMETRIAS D  
Address: 935 ORANGE AVENUE SUITE 102  
City-St-Zip: WINTER PARK, FL 32789

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: OMETRIAS DEON LONG

P, D

10/14/2009

Electronic Signature of Signing Officer or Director

Date