2005 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N05096

FILED Oct 05, 2005 Secretary of State

Entity Name: FLORIDA MINORITY SUPPLIER DEVELOPMENT COUNCIL, INC. **Current Principal Place of Business: New Principal Place of Business:** 6880 LAKE ELLENOR DRIVE 104 A ORLANDO, FL 32809 **New Mailing Address: Current Mailing Address:** 6880 LAKE ELLENOR DRIVE 104A ORLANDO, FL 32809 LIS FEI Number: 59-2547257 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: MATUSZEWSKI, SUSAN A MS ALI, MALIK 434 OAK HAVEN DRIVE 545 VERN DR ALTAMONTE SPRINGS, FL 32701 US ORLANDO, FL 32805 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: MALIK ALI 10/05/2005 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete (X) Change () Addition BATCHELLOR, STEVEN MR BARRY, ROBERT Name: Name: 702 N FRANKLIN ST Address: 7445 EXCHANGE DR Address: City-St-Zip: TAMPA, FL 33601 US City-St-Zip: ORLANDO, FL 32809 US Title: () Delete Title: () Change () Addition SICA, NORMA MS Name: Name: Address: 6990 LAKE ELLENOR DRIVE Address: City-St-Zip: ORLANDO, FL 32809 US City-St-Zip: Title: () Delete Title: () Change () Addition NESBITT, VALERIE MS Name: Name: 1020 DELTA BLVD DEPT 916 Address: Address: City-St-Zip: ATLANTA, GA 30320 US City-St-Zip: Title: () Delete Title: (X) Change () Addition Name: MCCORMES BALLOU, ROBERT MR Name: MCCORMES BALLOU, ROBERT MR 2200 OLD GERMANTOWN RD, MC 32B3633 2200 OLD GERMANTOWN RD, MC 32B3633 Address: Address: City-St-Zip: DELRAY BEACH, FL 33445 US City-St-Zip: DELRAY BEACH, FL 33445 US Title: () Delete Title: (X) Change () Addition ALI, MALIK MR ALI, MALIK MR Name: Name: 6880 LAKE ELLENOR DR, STE 104A 545 VERN DR Address: Address: ORLANDO, FL 32809 US ORLANDO, FL 32809 US City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: MALIK ALI Ρ 10/05/2005