

2008 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N06000007300

FILED
Mar 17, 2008
Secretary of State

Entity Name: GRADUATES OF VISION GROUP, INC.

Current Principal Place of Business:

10151 UNIVERSITY BLVD STE 102
ORLANDO, FL 32817

New Principal Place of Business:

10151 UNIVERSITY BLVD
STE 102
ORLANDO, FL 32817

Current Mailing Address:

10151 UNIVERSITY BLVD STE 102
ORLANDO, FL 32817

New Mailing Address:

10151 UNIVERSITY BLVD
STE 102
ORLANDO, FL 32817

FEI Number: **FEI Number Applied For (X)** **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:

PHILLIP, SHARLENE P
10151 UNIVERSITY BLVD STE 102
ORLANDO, FL 32817 US

Name and Address of New Registered Agent:

PRINCE PHILLIP, SHARLENE
10151 UNIVERSITY BLVD STE 102
ORLANDO, FL 32817 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: SHARLENE PRINCE PHILLIP

03/17/2008

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: PHILLIP, SHARLENE P
Address: 10151 UNIVERSITY BLVD STE 102
City-St-Zip: ORLANDO, FL 32817

Title: VP () Delete
Name: MERRITT, GARVIN
Address: 10151 UNIVERSITY BLVD STE 102
City-St-Zip: ORLANDO, FL 32817

Title: T () Delete
Name: BATTEN, JOSEPH
Address: 10151 UNIVERSITY BLVD STE 102
City-St-Zip: ORLANDO, FL 32817

Title: () Delete
Name:
Address:
City-St-Zip:

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: VP () Change (X) Addition
Name: BOURNE YOUNG, SANDRA
Address: 10151 UNIVERSITY BOULEVARD STE 102
City-St-Zip: ORLANDO, FL 32817

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: SHARLENE PRINCE PHILLIP

PRES

03/17/2008

Electronic Signature of Signing Officer or Director

Date