2007 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N06000010559

FILED Nov 13, 2007 Secretary of State

Entity Name: THE DNA GROUP OF CENTRAL FLORIDA, INC.

Current Principal Place of Business: New Principal Place of Business: 7237 HIAWASSEE OAK DR. ORLANDO, FL 32818 **Current Mailing Address: New Mailing Address:** 7237 HIAWASSEE OAK DR. ORLANDO, FL 32818 FFI 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: Name and Address of New Registered Agent: EPPS, DENISE 7237 HIAWASSEE OAK DR. ORLANDO, FL 32818 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: DENISE A. EPPS Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition MORNING, GEORGE T. Name: Name: Address: 4494 REAL CT. Address: City-St-Zip: ORLANDO, FL 32808 City-St-Zip: Title: () Delete Title: () Change () Addition EPPS, DENISE A. Name: Name: Address: 7237 HIAWASSEE OAK DR. Address: City-St-Zip: ORLANDO, FL 32818 City-St-Zip: Title: () Delete Title: () Change () Addition MATTHEWS, LINDA Name: Name: 23 WATER GRANT ST., UNIT 2F Address: Address: City-St-Zip: YONKERS, NY 10701 City-St-Zip: Title: DT () Delete Title: () Change () Addition Name: TILLMAN, GERALD Name: Address: 1415 BARNSLEY WALK Address: City-St-Zip: SNELLVILLE, GA 30078 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: DENISE A. EPPS MS. 11/13/2007