## 2007 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

## DOCUMENT# N06000011708

**FILED** Oct 05, 2007 Secretary of State

Entity Name: GOLDEN MUSIC ACADEMY FOR THE PERFORMING ARTS, INC. **Current Principal Place of Business: New Principal Place of Business:** 348 WILSHIRE BOULEVARD CASSELBERRY, FL 32707 **Current Mailing Address: New Mailing Address:** 348 WILSHIRE BOULEVARD 3415 HEIRLOOM ROSE PLACE CASSELBERRY, FL 32707 OVIEDO, FL 32766 FEI Number: 20-5868252 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: Name and Address of New Registered Agent: SPIEGEL & UTRERA, P.A. VAIDYANATHAN, MOHAN 1840 SW 22ND ST. 3415 HEIRLOOM ROSE PLACE 4TH FLOOR OVIEDO, FL 32766 MIAMI, FL 33145 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: MOHAN VAIDYANATHAN 10/05/2007 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: DPST () Change () Addition () Delete VAIDYANATHAN, RANELLE Name: Name: 348 WILSHIRE BOULEVARD Address: Address: City-St-Zip: CASSELBERRY, FL 32707 City-St-Zip: Title: ( ) Delete Title: () Change () Addition FOSTER, TAMI M Name: Name: Address: 348 WILSHIRE BOULEVARD Address: City-St-Zip: CASSELBERRY, FL 32707 City-St-Zip: Title: () Delete Title: (X) Change ( ) Addition TURNER, TIMOTHY D Name: HICKS, KE'LEE Name: 348 WILSHIRE BOULEVARD 348 WILSHIRE BOULEVARD Address: Address: City-St-Zip: CASSELBERRY, FL 32707 City-St-Zip: CASSELBERRY, FL 32707 Title: ( ) Delete Title: () Change () Addition Name: VAIDYANATHAN, MOHAN Name: 348 WILSHIRE BOULEVARD Address: Address: City-St-Zip: CASSELBERRY, FL 32707 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: RANELLE VAIDYANATHAN DIR 10/05/2007