

2014 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N06000011740

FILED
Nov 03, 2014
Secretary of State

Entity Name: NOAH WORCESTER ENDOWMENT FUND, INC.

Current Principal Place of Business:

204 N. CARROLL STREET
ISIAMORADA, FL 33036

New Principal Place of Business:

8365 KEYSTONE CROSSING
SUITE 107
INDIANAPOLIS, IN 46240

Current Mailing Address:

204 N. CARROLL STREET
ISIAMORADA, FL 33036

New Mailing Address:

8365 KEYSTONE CROSSING
SUITE 107
INDIANAPOLIS, IN 46240

FEI Number: 35-2285490

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

AMERICAN INFORMATION SERVICES, INC.
ONE SOUTHEAST THIRD AVENUE, SUITE 2800
MIAMI, FL 33131 US

Name and Address of New Registered Agent:

NRAI SERVICES, INC
1200 S PINE ISLAND RD
PLANTATION, FL 33324 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: RACHEL GLASHEEN/ASSISTANT SECRETARY

11/03/2014

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: MR
Name: DAVIS, BRUCE
Address: 8365 KEYSTONE CROSSING, STE 107
City-St-Zip: INDIANAPOLIS, IN 46240

Title: MR
Name: DANIEL, RALPH
Address: 971 LAKE LAND DR, UNIT 659
City-St-Zip: JACKSON, MS 39216

Title: MR
Name: BODIAN, ADAM
Address: 11 GRACE AVE, STE 100
City-St-Zip: GREAT NECK, NY 11021

Title: MR
Name: COCKERELL, CLAY
Address: 2110 RESEARCH ROW, STE 100
City-St-Zip: DALLAS, TX 75235

Title: MR
Name: ELY, P. HAINES
Address: 565 BRUNSWICK RD, STE 7
City-St-Zip: GRASS VALLEY, CA 95945

Title: MR
Name: PERNICARO, CHARLES
Address: 5008 MUSTANG RD
City-St-Zip: JACKSONVILLE, FL 32233

I hereby 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 all other like empowered.

SIGNATURE: BRUCE DAVIS

MR

11/03/2014

Electronic Signature of Signing Officer or Director

Date