

2009 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N06000011825

FILED
Dec 02, 2009
Secretary of State

Entity Name: STOP THE MADNESS OUTREACH, INC.

Current Principal Place of Business:

1160 W DE SOTO STREET
CLERMONT, FL 34711

New Principal Place of Business:

Current Mailing Address:

1160 W DE SOTO STREET
CLERMONT, FL 34711

New Mailing Address:

106 CARLYLE STREET
MINNEOLA, FL 34715

FEI Number: 51-0622203 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:

CLARK, SANDETA
1160 W DE SOTO STREET
CLERMONT, FL 34711 US

Name and Address of New Registered Agent:

CLARK, SANDETA
106 CARLYLE STREET
MINNEOLA, FL 34715 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: SANDETA CLARK SOLOMON

12/02/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PTD () Delete
Name: CLARK, SANDETA
Address: 1160 W. DESOTO ST
City-St-Zip: CLERMONT, FL 34711

Title: SD () Delete
Name: IVORY, DENISE
Address: 429 CIERRA OAK CIRCLE
City-St-Zip: LADY LAKE, FL 32159

Title: VD () Delete
Name: GILLIAN, GLORIA
Address: 1817 WAKE FOREST AVE
City-St-Zip: CLERMONT, FL 34711

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PTD (X) Change () Addition
Name: CLARK, SANDETA
Address: 106 CARLYLE STREET
City-St-Zip: MINNEOLA, FL 34715

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
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: SANDETA CLARK SOLOMON

PTD

12/02/2009

Electronic Signature of Signing Officer or Director

Date