2009 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

FILED
Oct 09, 2009
Secretary of State

DOCUMENT# N06000012334

Entity Name: IHWN, INC.

Current Principal Place of Business:

5725 N. APOPKA VINELAND ROAD
ORLANDO, FL 32818

New Principal Place of Business:

Current Mailing Address:

5725 N. APOPKA VINELAND ROAD
ORLANDO, FL 32818

New Mailing Address:

FEI Number: 20-5967508 **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:

KAPES, KIM
5725 N. APOPKA VINELAND ROAD
ORLANDO, FL 32818 US

Name and Address of New Registered Agent:

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: KIM KAPES

Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: KAPES, KIM
Address: 5725 N. APOPKA VINELAND ROAD
City-St-Zip: ORLANDO, FL 32818

Title: VP ( ) Delete
Name: BONE, ELLEN E
Address: 5725 N. APOPKA VINELAND RD
City-St-Zip: ORLANDO, FL 32818

Title: AD ( ) Delete
Name: ESHLEMAN, EDITH
Address: 7900 PEBBLE BROOK COURT
City-St-Zip: SPRINGFIELD, VA 22153

Title: AD ( ) Delete
Name: CAPPABIANCA, SHERRI
Address: 1493 WESTCHESTER AVENUE
City-St-Zip: WINTER PARK, FL 32789

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: ( ) 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: KIM KAPES P 10/09/2009

Electronic Signature of Signing Officer or Director — Date