## 2008 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

## DOCUMENT# N07000006173

Entity Name: THE GOLDEN YEARS FOUNDATION, INC

FILED Oct 17, 2008 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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255 PRIMERA BLVD. 400 COLONIAL CENTER PARKWAY

SUITE 230 SUITE 300

LAKE MARY, FL 32746 LAKE MARY, FL 32746

Current Mailing Address: New Mailing Address:

255 PRIMERA BLVD. 400 COLONIAL CENTER PARKWAY

SUITE 230 SUITE 300

LAKE MARY, FL 32746 LAKE MARY, FL 32746

FEI Number: 26-0541116 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: Name and Address of New Registered Agent:

MARTINEZ, SUSAN M
255 PRIMERA BLVD.

MARTINEZ, SUSAN M
400 COLONIAL CENTER PARKWAY

SUITE 230 SUITE 300

LAKE MARY, FL 32746 US LAKE MARY, FL 32746 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: SUSAN MARTINEZ 10/17/2008

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

itle: P ( ) Delete Title: P (X) Change ( ) Addition

Name: MARTINEZ, SUSAN M
Address: 255 PRIMERA BLVD., STE. 230
Name: MARTINEZ, SUSAN M
Address: 400 COLONIAL CENTER PARKWAY STE 300

City-St-Zip: LAKE MARY, FL 32746 City-St-Zip: LAKE MARY, FL 32746

Title: D ( ) Delete Title: D (X) Change ( ) Addition

Name: MARTINEZ, TANYA Name: KEEN, TANIA

Address: 255 PRIMERA BLVD., SUITE 230 Address: 400 COLONIAL CENTER PARKWAY STE 300

City-St-Zip: LAKE MARY, FL 32746 City-St-Zip: LAKE MARY, FL 32746

Title: D (X) Delete Title: ( ) Change ( ) Addition

 Name:
 RAWSON, RIANA
 Name:

 Address:
 255 PRIMERA BLVD., SUITE 230
 Address:

 City-St-Zip:
 LAKE MARY, FL 32746
 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: TANIA KEEN D 10/17/2008