

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000009138

FILED  
May 01, 2009  
Secretary of State

Entity Name: RESTOREN INCORPORATED

## Current Principal Place of Business:

824 ROCK CREEK STREET  
APOPKA, FL 32712

## New Principal Place of Business:

1619 COUNTRY CLUB PKY  
LEHIGH ACRES, FL 33936

## Current Mailing Address:

824 ROCK CREEK STREET  
APOPKA, FL 32712

## New Mailing Address:

1619 COUNTRY CLUB PKY  
LEHIGH ACRES, FL 33936

FEI Number: 26-3124633      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:

CUMMINGS-GRAYSON & CO  
915 NW 1ST AVENUE, BAY 3-A  
MIAMI, FL 33136 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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: LEYSATH, STELLA K  
Address: 824 ROCK CREEK STREET  
City-St-Zip: APOPKA, FL 32712

Title: T ( ) Delete  
Name: ELLIS, JUANTEZ 1 901 RAI  
Address: 1901 RAIFORD ROAD  
City-St-Zip: STARKE, FL 32091

Title: S ( ) Delete  
Name: JOHNSON, ADA D  
Address: 207 TUSCARONA COURT  
City-St-Zip: ST. MARYS, GA 31558

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: LEYSATH, STELLA K  
Address: 1619 COUNTRY CLUB PKY  
City-St-Zip: LEHIGH ACRES, FL 33936

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: STELLA K LEYSATH

CEO

05/01/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date