

2014 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N10000008225

FILED
Oct 18, 2014
Secretary of State

Entity Name: THE BRADLEY SUMMERSILL FOUNDATION, INC.

Current Principal Place of Business:

3838 PETERSON RD
APOPKA, FL 32712

New Principal Place of Business:

2560 HAULOVER BLVD
DELTONA, FL 32738 US

Current Mailing Address:

3838 PETERSON RD
APOPKA, FL 32712

New Mailing Address:

2560 HAULOVER BLVD
DELTONA, FL 32738 US

FEI Number: 27-3905594

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

SUMMERSILL, BRIAN R
3838 PETERSON RD
APOPKA, FL 32712 US

Name and Address of New Registered Agent:

SUMMERSILL, BRIAN R
2560 HAULOVER BLVD
DELTONA, FL 32738 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: BRIAN R SUMMERSILL

10/18/2014

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PRES
Name: SUMMERSILL, DEANNA D
Address: 2560 HAULOVER BLVD
City-St-Zip: DELTONA, FL 32738 US

Title: VP
Name: SUMMERSILL, TINA
Address: 19 E TANGLEWOOD DR
City-St-Zip: APOPKA, FL 32712 US

Title: TRUS
Name: WARREN, PEGGY
Address: 1219 THORNBURG CT.
City-St-Zip: WINTER GARDEN, FL 34787 US

Title: SECR
Name: SUMMERSILL, PEGGY M
Address: 2560 HAULOVER BLVD
City-St-Zip: DELTONA, FL 32738 US

Title: TREA
Name: BRETON, JOANNE
Address: 1030 WINDMILL GROVE CIRLCE
City-St-Zip: ORLANDO, FL 32828 US

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: PEGGY M SUMMERSILL

SECR

10/18/2014

Electronic Signature of Signing Officer or Director

Date