

2007 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N35319

FILED
Dec 01, 2007
Secretary of State

Entity Name: RIVER CITY ASSOCIATION OF THE DEAF, INC.

Current Principal Place of Business:

1371 KEEL CT
ORANGE PARK, FL 32003 02

New Principal Place of Business:

37388 ORANGE ST.
HILLIARD, FL 32046

Current Mailing Address:

1371 KEEL CT
ORANGE PARK, FL 32003 02

New Mailing Address:

37388 ORANGE ST.
HILLIARD, FL 32046

FEI Number: 59-2980944

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

STEVENS, CHRISTINE
1371 KEEL CT
ORANGE PARK, FL 32003 US

Name and Address of New Registered Agent:

QUINONES, HERBIE
37388 ORANGE ST.
HILLIARD, FL 32046 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: HERIBERTO QUINONES

12/01/2007

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: V () Delete
Name: COPPINGER, KERRY
Address: 6434 JACK WRIGHT ISLAND RD
City-St-Zip: ST AUGUSTINE, FL 32092

Title: P () Delete
Name: STEVENS, CHRISTINE
Address: 1371 KEEL CT
City-St-Zip: ORANGE PARK, FL 32003

Title: T () Delete
Name: MC DAVID, RANDY
Address: 4325 PLAZA GATE LN, S #202
City-St-Zip: JACKSONVILLE, FL 32247

Title: S () Delete
Name: COOLER, DONALD
Address: 6434 JACK WRIGHT ISLAND RD
City-St-Zip: ST AUGUSTINE, FL 32092

Title: D () Delete
Name: DATTILIO, JANET
Address: 1035 ARROWHEAD CT
City-St-Zip: JACKSONVILLE, FL 322577001

Title: D () Delete
Name: MOORE, RON
Address: 1701 PARK AVE
City-St-Zip: ORANGE, FL 32073

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: V (X) Change () Addition
Name: COOLER, KERRY
Address: 6434 JACK WRIGHT ISLAND RD
City-St-Zip: ST AUGUSTINE, FL 32092

Title: P (X) Change () Addition
Name: QUINONES, HERBIE
Address: 37388 ORANGE ST.
City-St-Zip: HILLIARD, FL 32046

Title: T (X) Change () Addition
Name: SHAW, DANNY
Address: 1482 CRABAPPLE COVE CT. S.
City-St-Zip: JACKSONVILLE, FL 32225

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

Title: D (X) Change () Addition
Name: QUINONES, JANET
Address: 37388 ORANGE ST.
City-St-Zip: HILLIARD, FL 32046

Title: D (X) Change () Addition
Name: RECKERT, MADDY
Address: 9087 BERENS ST.
City-St-Zip: JACKSONVILLE, FL 32210

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: DANNY SHAW

T

12/01/2007

Electronic Signature of Signing Officer or Director

Date