2007 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

FILED
Oct 07, 2007
Secretary of State

DOCUMENT# N43786

Entity Name: HAROLD E. BYRD EDUCATIONAL FOUNDATION, INC.

Current Principal Place of Business:

1416-13TH AVE. E.
BRADENTON, FL 34208

New Principal Place of Business:

Current Mailing Address:

1416-13TH AVE. E.
BRADENTON, FL 34208

New Mailing Address:

FEI Number: 65-0327328 **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:

RUSSELL, CLOVIA
1309 14TH STREET EAST
BRADENTON, FL 34208 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: CLOVIA RUSSELL
Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: BYRD, RUBY
Address: 1309-14TH ST. E.
City-St-Zip: BRADENTON, FL 34208

Title: VPTD ( ) Delete
Name: BYRD, CAROL
Address: 1020 WEDGEWOOD DRIVE
City-St-Zip: FAYETTEVILLE, GA 30214

Title: SD ( ) Delete
Name: RUSSELL, CLOVIA
Address: 1309 14TH ST E
City-St-Zip: BRADENTON, FL 34208

Title: ED ( ) Delete
Name: BYRD, HAROLD
Address: 1416-13TH AVE. E.
City-St-Zip: BRADENTON, FL 34208

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: CLOVIA RUSSELL SD 10/07/2007
Electronic Signature of Signing Officer or Director — Date