2004 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

FILED
Dec 15, 2004
Secretary of State

DOCUMENT# N44595

Entity Name: VOICES FOR CHILDREN OF NORTH CENTRAL FLORIDA, INC.

Current Principal Place of Business:

GUARDIAN ADLITEM PROGRAM
18 NE 1ST AVE
OCALA, FL 34740

New Principal Place of Business:

Current Mailing Address:

PO BOX 507
BELLEVIEW, FL 34421

New Mailing Address:

18 N. E. 1ST AVENUE
OCALA, FL 34740

FEI Number: 91-1854844 **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:

ASHERAFT, TERESA
18 NE 1ST AVE
OCALA, FL 34470 US

Name and Address of New Registered Agent:

PERRY, DAMIAN
5420 SE 32ND PLACE
OCALA, FL 34771 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: DAMIAN PERRY 12/15/2004
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: TD ( ) Delete
Name: ROSIN, EVELYN
Address: 13024 SE 47TH CIR
City-St-Zip: BELLEVIEW, FL 34420

Title: PD ( ) Delete
Name: CASADO, HECTOR
Address: 3718 NE 8TH PLACE
City-St-Zip: OCALA, FL 344700900

Title: SD ( ) Delete
Name: MORGAN, JAMES
Address: 468 BANNING BENCH RD.
City-St-Zip: TAVARES, FL 32778

Title: VPD (X) Delete
Name: PECK, HELEN
Address: 1950 N.W. 47TH TERR.
City-St-Zip: OCALA, FL 34482

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CH (X) Change ( ) Addition
Name: ROBERTSON, LALENYA J
Address: 36638 NASHUA BLVD.
City-St-Zip: SORRENTO, FL 32776

Title: VC (X) Change ( ) Addition
Name: CASADO, HECTOR
Address: 3718 NE 8TH PLACE
City-St-Zip: OCALA, FL 34470

Title: TR (X) Change ( ) Addition
Name: SCOTT, SUZI
Address: 1401 SW 60TH STREET RD.
City-St-Zip: OCALA, FL 34474

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

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: LALENYA J. ROBERTSON CH 12/15/2004
Electronic Signature of Signing Officer or Director Date