2009 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

FILED
09 JUN -9 PM 4:30
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N47320

1. Entity Name
ORLANDO CHAPTER OF S.P.E.B.S.Q.S.A. INC.

REINSTATEMENT 08/09 KS

Principal Place of Business	Mailing Address
813 MONTANA STREET ORLANDO, FL 32803	1237 ROYAL OAK DR WINTER SPRINGS, FL 32708 US

2. Principal Place of Business - No P.O. Box #	3. Mailing Address
	413 Forrest Ln
Suite, Apt. #, etc.	Suite, Apt #, etc.
City & State	City & State: Kissimmee Fl
Zip / Country	Zip: 34746 / Country: USA

4. FEI Number: NOT APPLICABLE ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☒ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
NYE, WILLIAM C 1237 ROYAL OAK DR ORLANDO, FL 32708	Name: Michael C Gold Street Address (P.O. Box Number is Not Acceptable): 1277 Cedar Center Dr. City: Tallahassee FL Zip Code: 32301

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE X _____ 6/9/09
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS $122.50

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Make check payable to Florida Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P MCELRAVY, JAMES 413 FOREST LANE KISSIMMEE, FL 34746	☐ Delete	P. C. Richard Bame 8039 Captain Morgan Blvd Orlando Fl 32822	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	IPP CALDARAZZO, FRANK 3625 EDLAND DR ORLANDO, FL 32812	☒ Delete	S. James McElravy 413 Forrest Lane Kissimmee Fl 34746	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S/T NYE, WILLIAM C 1237 ROYAL OAK DR WINTER SPRINGS, FL 32708	☒ Delete	T. Kevin Hunsicker 2400 Summerlin Ave Orlando Fl 32806	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP RAY, CHARLES 2786 WAGON WHEEL CIRCLE ORLANDO, FL 32822	☐ Delete	D. 700156962907 06/10/09--01003--007 **131.25	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP PALOMINO, LARRY 10095 SHADOW CREEK DR ORLANDO, FL 32923	☐ Delete	D	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP HANOVER, PAUL 1231 SAINT ALBANS LOOP HEATHROW, FL 327461979	☒ Delete	D Jim Lebley 193 N. Lake Jessup Ave Ovido Fl 32765	☐ Change ☒ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: _____ Attorney in Fact 6-9-09 8506563060
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #