

# 2009 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N49415

FILED  
Apr 22, 2009  
Secretary of State

Entity Name: RESTORE ORLANDO, INC.

## Current Principal Place of Business:

1030 W KALEY ST  
ORLANDO, FL 32805 US

## New Principal Place of Business:

## Current Mailing Address:

P.O. BOX 568606  
ORLANDO, FL 32856 US

## New Mailing Address:

FEI Number: 59-3136841      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:

BRITTON, BRIAN  
700 LITTLE HAMPTON LANE  
GOTHA, FL 34734 US

## Name and Address of New Registered Agent:

WILSON, GARY D  
180 NORTH PARK AVE  
WINTER PARK, FL 32789 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: GARY D. WILSON

04/22/2009

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: CD ( ) Delete  
Name: BRITTON, BRIAN  
Address: 700 LITTLE HAMPTON LANE  
City-St-Zip: GOTHA, FL 34734

Title: ED ( ) Delete  
Name: ALBRITTON, CAROLYN  
Address: 1030 W KALEY AVE  
City-St-Zip: ORLANDO, FL 32805

Title: SD ( ) Delete  
Name: DEGAILLER, BRIAN  
Address: 678 PINE SHADOW COURT  
City-St-Zip: LONGWOOD, FL 32779

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CHMD (X) Change ( ) Addition  
Name: BRITTON, BRIAN  
Address: 700 LITTLE HAMPTON LANE  
City-St-Zip: GOTHA, FL 34734

Title: EXD (X) Change ( ) Addition  
Name: ALBRITTON, CAROLYN  
Address: 1030 W KALEY AVE  
City-St-Zip: ORLANDO, FL 32805

Title: SCD (X) Change ( ) Addition  
Name: INGRAM, DAVID  
Address: 1039 23RD STREET  
City-St-Zip: ORANDO, FL 32805

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: CAROLYN ALBRITTON

EXD

04/22/2009

Electronic Signature of Signing Officer or Director

Date