## 2012 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

## DOCUMENT# N93000003997

FILED Oct 24, 2012 Secretary of State

Entity Name: THE CFA SOCIETY OF ORLANDO, INC.

Current Principal Place of Business: New Principal Place of Business:

1673 MASON AVE 481 NEWBURYPORT AVENUE SUITE #100 ALTAMONTE SPRINGS, FL 32701

DAYTONA BEACH, FL 32117

Current Mailing Address: New Mailing Address:

P.O. BOX 2783 481 NEWBURYPORT AVENUE ORLANDO, FL 328022783 ALTAMONTE SPRINGS, FL 32701

FEI Number: 59-3213363 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

CANNON, CHRISTOPHER 1673 MASON AVE SUITE #100

DAYTONA BEACH, FL 32117 US

JASON, FLOWERS
481 NEWBURYPORT AVENUE
ALTAMONTE SPRINGS, FL 32701 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: JASON FLOWERS 10/24/2012

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

Γitle: MR

Name: CANNON, CHRISTOPHER
Address: 1673 MASON AVE
City-St-Zip: DAYTONA BEACH, FL 32117

Title: MR

 Name:
 GIBSON, JOHNNY T

 Address:
 390 N ORANGE AVE #700

 City-St-Zip:
 ORLANDO, FL 32801

Title: MR

Name: JASON, FLOWERS

Address: 481 NEWBURYPORT AVENUE City-St-Zip: ALTAMONTE SPRINGS, FL 32701

Title: MR

 Name:
 ROSS, MARC O

 Address:
 1224 KENTSHIRE CT

 City-St-Zip:
 HEATHROW, FL 32746

I hereby 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 all other like empowered.

SIGNATURE: JASON FLOWERS MR 10/24/2012