

2009 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N94000000240

Entity Name: A LENNON FOUNDATION, INC.

FILED
Oct 29, 2009
Secretary of State

Current Principal Place of Business:

4225 SUMMIT CREEK BLVD.
6105
ORLANDO, FL 32837

New Principal Place of Business:

4316 WOODLYNNE LANE
ORLANDO, FL 32812

Current Mailing Address:

P O BOX 691435
ORLANDO, FL 32819 US

New Mailing Address:

FEI Number: 59-3216373 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:

LENNON, AUDREY V
4225 SUMMIT CREEK BLVD.
6105
ORLANDO, FL 32837 US

Name and Address of New Registered Agent:

RICHARDSON, JAMAL
4316 WOODLYNNE LANE
ORLANDO, FL 32812 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: JAMAL RICHARDSON

10/29/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: LENNON, AUDREY V
Address: 4225 SUMMIT CREEK BLVD.
City-St-Zip: ORLANDO, FL 32837

Title: VD () Delete
Name: RICHARDSON, JAMAL
Address: 4316 WOODLYNNE LN.
City-St-Zip: ORLANDO, FL

Title: TD () Delete
Name: LEONHARDT, FREDERICK W
Address: 301 E. PINE ST., SUITE 1200
City-St-Zip: ORLANDO, FL 32801

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: JAMAL, RICHARDSON
Address: 4316 WOODLYNNE LANE.
City-St-Zip: ORLANDO, FL 32812

Title: VD (X) Change () Addition
Name: SATTERWHITE, LILLIE
Address: 4316 WOODLYNNE LN.
City-St-Zip: ORLANDO, FL

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: JAMAL RICHARDSON

PD

10/29/2009

Electronic Signature of Signing Officer or Director

Date