2008 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N96000001437

FILED Jun 20, 2008 Secretary of State

Entity Name: 0550: COMMUNITY INVOLVEMENT AND COMMITMENT CLUB OF TAMPA, INC.

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

3909 E. CARACAS ST. 308 WEST FRANCES AVE.

TAMPA, FL 336106627 TAMPA, FL 33602

Current Mailing Address:

308 WEST FRANCES AVE

New Mailing Address:

P.O. BOX 11067 TAMPA, FL 336801067 TAMPA, FL 33602

FEI Number: 59-3366018 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: Name and Address of New Registered Agent:

HOLLIDAY, JULIE 3211 DARLINGTON DRIVE TAMPA, FL 33619

JOLLY-BOWDEN, CYNTHIA MS. 308 WEST FRANCES AVE. TAMPA, FL 33602

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: CYNTHIA BOWDEN-JOLLY 06/20/2008

> Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change () Addition () Delete SIRMONS, ALICE D LEMONS, SELENA C MRS. Name: Name: 110 S. WESTLAND AVE Address: 11514 BUTTONBAY PLACE Address: City-St-Zip: TAMPA, FL 33606 City-St-Zip: TAMPA, FL 33534

Title: () Delete Title: (X) Change () Addition STARLING, WANDA E Name: YORK, DOROTHY C MRS. Name: Address: 2081/2 MELVILLE AVE S. Address: 3909 E. CARACAS STREET City-St-Zip: TAMPA, FL 33606 City-St-Zip: TAMPA, FL 33610

Title: () Delete Title: (X) Change () Addition HOLLIDAY, JULIE B Name: WILSON, SYLVIA D MS. Name:

3211 DARLINGTON DRIVE Address: Address: P.O. BOX 16944 City-St-Zip: TAMPA, FL 33619 City-St-Zip: TAMPA, FL 336687

Title: () Delete Title: (X) Change () Addition HORDGE, PATRICIA L Name: Name: HOWELL, FLORENCE DR. Address: 2121 ARCH ST Address: 6400 N. 15TH STREET

City-St-Zip: TAMPA, FL 33607 City-St-Zip: TAMPA, FL 33607 Title: () Delete Title: () Change (X) Addition

GOOSBY, GAIL MS. Name: Name: P.O. BOX 342162 Address: Address: City-St-Zip: City-St-Zip: TAMPA, FL 33694

Title: () Delete Title: () Change (X) Addition JOLLY-BOWDEN, CYNTHIA MS. Name: Name:

Address: Address: 308 W. FRANCES AVE TAMPA, FL 33602 US City-St-Zip: 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: CYNTHIA BOWDEN-JOLLY D 06/20/2008