## 2009 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

## DOCUMENT# N96000001997

FILED Oct 08, 2009 Secretary of State

Entity Name: UNITED COMMUNITY DEVELOPMENT, INC.

**Current Principal Place of Business: New Principal Place of Business:** 1950 LEE ROAD 208 WINTER PARK, FL 327891859 **New Mailing Address: Current Mailing Address:** POST OFFICE BOX 991 WINTER PARK, FL 327900991 FEI Number: 59-3380885 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: Name and Address of New Registered Agent: ALSTON, THOMAS N ALSTON, THOMAS 1950 LEE ROAD 1950 LEE ROAD 208 208 WINTER PARK, FL 327891859 US WINTER PARK, FL 327891859 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: THOMAS N. ALSTON 10/08/2009 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete (X) Change ( ) Addition ALSTON, THOMAS N ALSTON, THOMAS Name: Name: 1544 CROSSBEAM DRIVE Address: 1544 CROSSBEAM DRIVE Address: City-St-Zip: CASSELBERRY, FL 327075926 City-St-Zip: CASSELBERRY, FL 32707 Title: (X) Delete Title: () Change () Addition THOMAS, KENNETH L Name: Name: Address: 3527 LAUGHLIN ROAD Address: City-St-Zip: ZELLWOOD, FL 327985305 City-St-Zip: Title: () Delete Title: () Change () Addition BARON, JOSEPH N Name: Name: Address: 1730 K STREET NW Address: City-St-Zip: WASHINGTON, DC 200063801 City-St-Zip: Title: CPD () Delete Title: CPD (X) Change ( ) Addition Name: COTTINGHAM, WINTHROP E Name: COTTINGHAM, WINTHROP E 1475 LEXINGTON PARKWAY 1475 LEXINGTON PARKWAY Address: Address: City-St-Zip: APOPKA, FL 327122695 City-St-Zip: APOPKA, FL 32712 Title: () Delete Title: ( ) Change (X) Addition HENRY, ADRIANNE Name: Name: 2869 LYNDSCAPE STREET Address: Address: City-St-Zip: City-St-Zip: ORLANDO, FL 32833 Title: () Delete Title: ( ) Change (X) Addition DYSON, MARLENA Name: Name: Address: Address: 5302 CHAMPAGNE CIRCLE ORLANDO, FL 32808 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: THOMAS N. ALSTON TD 10/08/2009