

2014 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N96000006539

FILED
Jun 05, 2014
Secretary of State

Entity Name: VICTIMS OF INEQUITABLE COMPENSATION ENACTMENTS SOCIETY, INC.

Current Principal Place of Business:

7937 JAGUAR DRIVE
JACKSONVILLE, FL 32244

New Principal Place of Business:

19392 LAUZON AVENUE
PORT CHARLOTTE, FL 33948

Current Mailing Address:

MARY BAILEY
7937 JAGUAR DRIVE
JACKSONVILLE, FL 32244

New Mailing Address:

19392 LAUZON AVENUE
PORT CHARLOTTE, FL 33948

FEI Number: 65-0740717

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BAILEY, MARY E
7937 JAGUAR DRIVE
JACKSONVILLE, FL 32244 US

Name and Address of New Registered Agent:

COLFORD, CAHERINE
19392 LAUZON AVENUE
PORT CHARLOTTE, FL 33948 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: CATHERINE COLFORD

06/05/2014

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PRES
Name: COLFORD, CATHERINE
Address: 19392 LAUZON AVENUE
City-St-Zip: PORT CHARLOTTE, FL 33948

Title: VP
Name: BAILEY, MARY
Address: 7937 JAGUAR DRIVE
City-St-Zip: JACKSONVILLE, FL 32244

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: CATHERINE COLFORD

PRES

06/05/2014

Electronic Signature of Signing Officer or Director

Date