2006 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N97000006007

Entity Name: THE O.P.E.N. CENTER, INC.

FILED Jun 24, 2006 Secretary of State

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

1310 W COLONIAL DRIVE 30 COBURN AVENUE STE 29 ORLANDO, FL 32805

ORLANDO, FL 32804

Current Mailing Address: New Mailing Address:

7674 ST STEPHENS CT 30 COBURN AVENUE ORLANDO, FL 32835 ORLANDO, FL 32805

FEI Number: 59-3463538 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:

GELZER, LAWANNA R

7674 ST STEPHENS CT

ORLANDO, FL 32835 US

CAREY, JANE E ESQ.
904 W. COLONIAL DRIVE
ORLANDO, FL 32805 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: JANE E. CAREY, ESQ. 06/24/2006

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: B () Delete Title: PD (X) Change () Addition Name: SERAAJ, KEVIN REV SERAAJ, KEVIN REV

 Address:
 218 S. LIME AVE.
 Address:
 30 COBURN AVENUE

 City-St-Zip:
 ORLANDO, FL 32805
 City-St-Zip:
 ORLANDO, FL 32805

Title: VD () Delete Title: VD (X) Change () Addition Name: GELZER, BETTY Name: MATTHEWS, JANICE

 Name:
 GELZER, BETTY
 Name:
 MATTHEWS, JANICE

 Address:
 825 W. WASHINGTON STREET
 Address:
 2303 MYRNA STREET

 City-St-Zip:
 ORLANDO, FL 32805
 City-St-Zip:
 ORLANDO, FL 32839

 Name:
 DORORTHY, CLARK
 Name:
 HUZZIE, AMYRAH

 Address:
 1310 W. COLONIAL DRIVE
 Address:
 4502 CANNA DRIVE

 City-St-Zip:
 ORLANDO, FL 32804
 City-St-Zip:
 ORLANDO, FL 32839

Title: PCEO () Delete Title: TD (X) Change () Addition

Name: GELZER, LAWANNA Name: FRAZIER, FLOYD
Address: 7674 ST STEPHENS CT Address: 4049 S. ORANGE BLOSSOM TRAIL - APT 245

City-St-Zip: ORLANDO, FL City-St-Zip: ORLANDO, FL 32839

I hereby certify that the information supplied with this filing does not qualify for the 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: REV. KEVIN SERAAJ PD 06/24/2006