2008 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

FILED
Oct 24, 2008
Secretary of State

DOCUMENT# N99000000758

Entity Name: THE JAMES FOLSTON YOUTH FOUNDATION, INC.

Current Principal Place of Business:

1035 PEACHTREE STREET
COCOA, FL 32922

New Principal Place of Business:

Current Mailing Address:

1035 PEACHTREE STREET
COCOA, FL 32922

New Mailing Address:

FEI Number: 59-3554884 **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:

TRENT, SHARON
387 HIBISCUS AVE
MERRITT ISLAND, FL 32953 US

Name and Address of New Registered Agent:

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: SHARON TRENT
Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: FOLSTON, JAMES
Address: 1450 VICTORIA BLVD
City-St-Zip: ROCKLEDGE, FL 32955

Title: VD ( ) Delete
Name: RANGE, LUKE
Address: 1327 RICHWOOD CIRCLE
City-St-Zip: ROCKLEDGE, FL 32955

Title: DS ( ) Delete
Name: HUDSON, LYNDA
Address: 920 FERN AVE
City-St-Zip: COCOA, FL 32922

Title: DT ( ) Delete
Name: FOLSTON, WILLIE
Address: 1450 VICTORIA BLVD
City-St-Zip: ROCKLEDGE, FL 32955

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

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: LUKE RANGE VD 10/24/2008
Electronic Signature of Signing Officer or Director — Date