

2013 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N99000004781

FILED
Apr 26, 2013
Secretary of State

Entity Name: THE CENTRAL FLORIDA BLACK CAUCUS OF LOCAL ELECTED OFFICIALS, INC.

Current Principal Place of Business:

307 E. KENNEDY BLVD
EATONVILLE, FL 32751 US

New Principal Place of Business:

Current Mailing Address:

307 E. KENNEDY BLVD.
EATONVILLE, FL 32751

New Mailing Address:

307 E. KENNEDY BLVD.
EATONVILLE, FL 32751 US

FEI Number: 59-3617122

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SCONIONS, MARILYN M
192 PEOPLE STREET
EATONVILLE, FL 32751 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: MARILYN SCONIONS

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PRES
Name: RUSSELL, TIFFANY MOORE
Address: 201 SOUTH ROSALIND AVE 5TH FLOOR
City-St-Zip: ORLANDO, FL 32801 US

Title: VP
Name: INGS, SAM
Address: 400 SOUTH ORANGE AVE
City-St-Zip: ORLANDO, FL 32801 US

Title: SECR
Name: THOMPSON, GERALDINE
Address: 511 WEST SOUTH STREET STE 201
City-St-Zip: ORLANDO, FL 32805 US

Title: TRES
Name: SCONIONS, MARILYN D
Address: 192 PEOPLES STREET
City-St-Zip: EATONVILLE, FL 32751 US

Title: CHAP
Name: COLE, EDDIE
Address: 545 EATON STREET
City-St-Zip: EATONVILLE, FL 32751 US

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: MARILYN SCONIONS

TRES

04/26/2013

Electronic Signature of Signing Officer or Director

Date