## 2009 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

## DOCUMENT# N99000007450

Oct 12, 2009 Secretary of State

Entity Name: SOUTHEASTERN REGIONAL RELOCATION COUNCIL, INC.

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

8131 VINELAND AVE PMB 312 ORLANDO, FL 32821

**New Mailing Address: Current Mailing Address:** 

8131 VINELAND AVE PMB 312 ORLANDO, FL 32821

FEI Number: 59-3616323 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:

KEENE, RICHARD C ATT. 800-C 3RD, STREET NEPTUNE BEACH, FL 32266 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: RICHARD KEENE

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete (X) Change ( ) Addition

VALIMONT, SARAH LEE, MARY LOU Name: Name: 8131 VINELAND AVE, PMB 312 Address: 8131 VINELAND AVE, PMB 312 Address:

City-St-Zip: ORLANDO, FL 32812 City-St-Zip: ORLANDO, FL 32812

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

Name: LEE, MARY LOU Name: CHADWICK, FAYE

Address: 8131 VINELAND AVE. PMB 312 Address: 8131 VINELAND AVE. PMB 312 City-St-Zip:

ORLANDO, FL 32812 City-St-Zip: ORLANDO, FL 32812

Title: () Delete Title: (X) Change ( ) Addition MAY, ANNE Name: CASTELLANOS, SHEILA Name:

8131 VINELAND AVE, PMB 312 8131 VINELAND AVE, PMB 312 Address: Address:

City-St-Zip: ORLANDO, FL 32812 City-St-Zip: ORLANDO, FL 32812

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

PERRIN, YIAN ROSS, SHERRY Name: Name: 11690 NW 105TH STREET Address: Address: 24 MAIN ST

City-St-Zip: MEDLEY, FL 33178 City-St-Zip: TAYLORSVILLE, GA 30178

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: SHERRY D. ROSS Т 10/12/2009