

2008 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

FILED

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA



REINSTATEMENT 2008

DOCUMENT # P39166 1. Entity Name GUIDE DOG FOUNDATION FOR THE BLIND, INC.																																																																																													
Principal Place of Business 371 EAST JERICHO TURNPIKE SMITHTOWN, NY 11787			Mailing Address 371 EAST JERICHO TURNPIKE SMITHTOWN, NY 11787																																																																																										
2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc.			3. Mailing Address Suite, Apt. #, etc.																																																																																										
City & State			City & State																																																																																										
Zip		Country		4. FEI Number 11-1687477																																																																																									
5. Certificate of Status Desired <input checked="" type="checkbox"/>				\$8.75 Additional Fee Required																																																																																									
6. Name and Address of Current Registered Agent SMYTH, PATRICIA 215 CALHOUN AVENUE DESTIN, FL 32541				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City <div style="display: flex; justify-content: space-between;"> FL Zip Code </div>																																																																																									
8. 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. I am familiar with, and accept the obligations of registered agent.																																																																																													
<div style="display: flex; justify-content: space-between;"> <div> SIGNATURE <input checked="" type="checkbox"/> <i>Patricia E. Smyth</i> <small>Signature, typed or printed name of registered agent and title if applicable</small> </div> <div> <i>Oct. 29, 2008</i> <small>DATE</small> </div> </div>																																																																																													
FILE NOW!!! FEE IS \$236.25 After January 1, 2009, Fee will be \$297.50				Make check payable to Florida Department of State																																																																																									
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.																																																																																													
<div style="display: flex; justify-content: space-between;"> <div> SIGNATURE: <i>Robert Stratford</i> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small> </div> <div> <i>10/31/08</i> <small>Date</small> </div> <div> <i>631-930-9000</i> <small>Daytime Phone #</small> </div> </div>																																																																																													