2006 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

FILED
Oct 04, 2006
Secretary of State

DOCUMENT# F99000002303

Entity Name: THE ORCHARD FOUNDATION INC.

Current Principal Place of Business:

8595 EXPLORER DRIVE
COLORADO SPRINGS, CO 80920

New Principal Place of Business:

Current Mailing Address:

PO BOX 35660
COLORADO SPRINGS, CO 809353566

New Mailing Address:

FEI Number: 84-1466105 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CLARK, STEPHEN
218 PLUMOSA ROAD
DEBARY, FL 32713 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: STEPHEN CLARK

Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: WHEELAND, DUANE A
Address: 8595 EXPLORER DRIVE
City-St-Zip: COLORADO SPRINGS, CO 80920

Title: VP ( ) Delete
Name: KREHELY, A. JOHN
Address: 8595 EXPLORER DRIVE
City-St-Zip: COLORADO SPRINGS, CO 80920

Title: C ( ) Delete
Name: PRESHER, DAVID F
Address: 8595 EXPLORER DRIVE
City-St-Zip: COLORADO SPRINGS, CO 80920

Title: D ( ) Delete
Name: COOK, NANCY D
Address: 6240 GALL BOULEVARD
City-St-Zip: ZEPHYRHILLS, FL 33542

Title: D ( ) Delete
Name: SAVALOJA, TIMOTHY D
Address: 6425 COUNTY ROAD 30
City-St-Zip: ST. BONIFACIUS, MN 55375

Title: D ( ) Delete
Name: PHILLIPS, DAVID
Address: 6275 PILLMORE DRIVE
City-St-Zip: ROME, NY 13440

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:

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

Title: D (X) Change ( ) Addition
Name: JAMES, MARK
Address: 221 EAST CHESTNUT STREET
City-St-Zip: LANCASTER, PA 176022782

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: WANDA G. ANDERSON, ESQ. O 10/04/2006

Electronic Signature of Signing Officer or Director — Date