

2009 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# 715460

FILED
Oct 10, 2009
Secretary of State

Entity Name: FLEET RESERVE HALL, INC.

Current Principal Place of Business:

657 FISHERMAN STREET
OPA LOCKA, FL 33054

New Principal Place of Business:

Current Mailing Address:

657 FISHERMAN STREET
OPA LOCKA, FL 33054

New Mailing Address:

FEI Number: 59-1549752 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)
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:

ULLMER, BRUCE E
3432 NW 86TH WAY, APT D 202
SUNRISE, FL 33351 US

Name and Address of New Registered Agent:

ULLMER, BRUCE E
10205 NW 33 STREET
SUNRISE, FL 33351 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: BRUCE ULLMER

10/10/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: S () Delete
Name: BOLYLE, WILLIAM O.
Address: 19143 NW 19TH ST
City-St-Zip: PEMBROKE PINES, FL

Title: T () Delete
Name: BENOIT, LEONARD
Address: 2648 NASSAU RD
City-St-Zip: MIRAMAR, FL 33023

Title: D () Delete
Name: ULLMER, BRUCE E
Address: 3432 NW 86TH WAY APT D202
City-St-Zip: SUNRISE, FL 33351

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: S (X) Change () Addition
Name: BOLYLE, WILLIAM O.
Address: 8601 NW 34 PLACE, APT A-205
City-St-Zip: SUNRISE, FL 33351

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

Title: D (X) Change () Addition
Name: ULLMER, BRUCE E
Address: 10205 NW 33 STREET
City-St-Zip: SUNRISE, FL 33351

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: BRUCE ULLMER

MGR

10/10/2009

Electronic Signature of Signing Officer or Director

Date