

2006 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

**FILED
Oct 10, 2006
Secretary of State**

DOCUMENT# 770891

Entity Name: THE TOWER GALLERY ARTIST COOPERATIVE, INC.

Current Principal Place of Business:

751 TARPON BAY RD.
SANIBEL, FL 33957 US

New Principal Place of Business:

Current Mailing Address:

751 TARPON BAY RD.
SANIBEL, FL 33957 US

New Mailing Address:

FEI Number: 59-2547501 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:

NASTARS, CAROLE A
114 COUSLEY DRIVE
PORT CHARLOTTE, FL 33952 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: CAROLE A. NASTARS

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: FRESE, CHARLES
Address: PO BOX 83
City-St-Zip: SANIBEL, FL 33957

Title: VPD () Delete
Name: RAVENNA, MARIANNE
Address: 588 BOULDER DRIVE
City-St-Zip: SANIBEL, FL 33957

Title: TD () Delete
Name: LISTER, CHARLES
Address: 9416 ARUM CT
City-St-Zip: SANIBEL, FL 33957

Title: SD () Delete
Name: YORK, MARCIA
Address: 18227 CUTLASS DR
City-St-Zip: SAINT PETERSBURG, FL 33706

Title: TD () Delete
Name: NASTARS, CAROLE
Address: 114 COUSLEY DR
City-St-Zip: PORT CHARLOTTE, FL 33952

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:

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: CAROLE A. NASTARS

TD

10/10/2006

Electronic Signature of Signing Officer or Director

Date