2011 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N08000007426

Entity Name: THE IDLEWILD FOUNDATION, INC.

FILED Oct 05, 2011 Secretary of State

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

18371 N. DALE MABRY HWY LUTZ, FL 33548 US

Current Mailing Address: New Mailing Address:

P.O. BOX 1757

LUTZ, FL 33548 US

FEI Number: 26-3267484 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

DEAROLF, PIETER J 18371 N. DALE MABRY HWY LUTZ, FL 33548 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: PIETER J. DEAROLF

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: [

Name: DEAROLF, PIETER J Address: P.O. BOX 1757 City-St-Zip: LUTZ, FL 33548

Title: D

Name: TAYLOR, ROBERT E Address: P.O. BOX 1757 City-St-Zip: LUTZ, FL 33548

Title:

Name: GRANT, JOHN A JR Address: P.O. BOX 1757 City-St-Zip: LUTZ, FL 33548

Title: VC

 Name:
 PERRY, ROBERT M

 Address:
 P. O. BOX 1757

 City-St-Zip:
 LUTZ, FL 33548

Title: SEC

Name: NIELSEN, RICHARD A JUDGE

Address: P.O. BOX 1757 City-St-Zip: LUTZ, FL 33548

Title: TREA

Name: SMITH, BYRON C Address: P.O. BOX 1757 City-St-Zip: LUTZ, FL 33548

I hereby 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 all other like empowered.

SIGNATURE: PIETER J. DEAROLF CHAI 10/05/2011