

2009 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

FILED
Dec 01, 2009
Secretary of State

DOCUMENT# N08000010136

Entity Name: SPRING RUN CHARITABLE FOUNDATION, INC.

Current Principal Place of Business:

9501 SPRING RUN BOULEVARD
BONITA SPRINGS, FL 34135

New Principal Place of Business:

Current Mailing Address:

9501 SPRING RUN BOULEVARD
BONITA SPRINGS, FL 34135

New Mailing Address:

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) 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:

ZIGLER, MICHAEL G
9501 SPRING RUN BOULEVARD
BONITA SPRINGS, FL 34135 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: MICHAEL G. ZIGLER

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: BARRETT, MIKE
Address: 9189 SPRING RUN BOULEVARD, #1908
City-St-Zip: BONITA SPRINGS, FL 34135

Title: D () Delete
Name: CASTO, DAVID
Address: 23785 CLEAR SPRING COURT, #2302
City-St-Zip: BONITA SPRINGS, FL 34135

Title: D () Delete
Name: CHADWICK, JACK
Address: 9136 SPRING RUN BOULEVARD
City-St-Zip: BONITA SPRINGS, FL 34135

Title: D () Delete
Name: KEEFER, BILL
Address: 23704 STONERIVER PLACE
City-St-Zip: BONITA SPRINGS, FL 34135

Title: D () Delete
Name: RYDSTROM, BARBARA
Address: 23925 CREEK BRANCH LANE
City-St-Zip: BONITA SPRINGS, FL 34135

Title: D () Delete
Name: WARREN, PAT
Address: 9161 SPRING RUN BOULEVARD, #1708
City-St-Zip: BONITA SPRINGS, FL 34135

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

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: MIKE BARRETT

Electronic Signature of Signing Officer or Director

D

12/01/2009

Date