

2009 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N06000002052

FILED
Jun 08, 2009
Secretary of State

Entity Name: THE JOHNNY GLENN THRIFT AND CONSIGNMENT SHOP, INC.

Current Principal Place of Business:

8105 CONDOR ST. , BUILDING 18
TAMPA, FL 33608

New Principal Place of Business:

8105 CONDOR ST. , BUILDING 18
TAMPA, FL 33608

Current Mailing Address:

PO BOX 6248
TAMPA, FL 33608

New Mailing Address:

FEI Number: 20-4503130 **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:

PHILHOWER, SHERI MANAGER
8105 CONDOR ST. BUILDING 18
TAMPA, FL 33608 US

Name and Address of New Registered Agent:

HOWE, ALICE PRESIDE
8105 CONDOR ST. BUILDING 18
TAMPA, FL 33608 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: ALICE A HOWE

06/08/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: HOLLEN, CAROL
Address: 1723 BILLY MITCHELL LOOP
City-St-Zip: TAMPA, FL 33621

Title: D () Delete
Name: BRANTING, MICHELLE
Address: 210 BLOOMINGFIELD DRIVE
City-St-Zip: BRANDON, FL 33511

Title: D () Delete
Name: STIVES, CHRISTINE G
Address: 954 HARBOUR BAY DRIVE
City-St-Zip: TAMPA, FL 33602

Title: D () Delete
Name: PATCH, KELLY
Address: 7913F TINKER STREET
City-St-Zip: TAMPA, FL 33621

Title: D (X) Delete
Name: MORIARTY, CINDY
Address: 2106 MCCLELLAND AVE
City-St-Zip: TAMPA, FL 33621

Title: D (X) Delete
Name: ZEIGLER, CHEREE
Address: 2824 WEST SHELTON AVE
City-St-Zip: TAMPA, FL 33611

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: HOWE, ALICE
Address: 2104 MCCLELLAND AVE
City-St-Zip: TAMPA, FL 33621

Title: D (X) Change () Addition
Name: WOLF, SAMANTHA
Address: P O BOX 6348
City-St-Zip: TAMPA, FL 33511

Title: D (X) Change () Addition
Name: FRANCIS, LISA
Address: P O BOX 6248
City-St-Zip: TAMPA, FL 33608

Title: D (X) Change () Addition
Name: CLINKSCALES, VERONICA
Address: P O BOX 6248
City-St-Zip: TAMPA, FL 33608

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: ALICE A. HOWE

PRES

06/08/2009

Electronic Signature of Signing Officer or Director

Date