2009 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N95000005486

FILED Aug 07, 2009 Secretary of State

Entity Name: ESCAMBIA HIGH SPORTS BOOSTERS' CLUB, INC. **Current Principal Place of Business: New Principal Place of Business:** 1310 N 65TH AVE PENSACOLA, FL 32506 **Current Mailing Address: New Mailing Address:** 14422 RIVER RD 1310 N 65TH AVE PENSACOLA, FL 32507 PENSACOLA, FL 32506 FEI Number: 59-3354700 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: Name and Address of New Registered Agent: KEMP, MARK ANDERSON, DAVID 311 N. SPRING STREET 4700 CONDADO CIRCLE PENSACOLA, FL 32501 US US PENSACOLA, FL 32507 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: SIGNING 08/07/2009 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition () Delete OUTTEN, DEBBIE Name: Name: 4814 STATE ST Address: Address: City-St-Zip: PENSACOLA, FL 32506 City-St-Zip: Title: Title: (X) Change () Addition () Delete Name: KEMP, MARK Name: ANDERSON, DAVID Address: 1504 SPRING STREET Address: 4700 CONDADO CIRCLE City-St-Zip: PENSACOLA, FL 32501 City-St-Zip: PENSACOLA, FL 32507 Title: () Delete Title: (X) Change () Addition CARSTENS, RITA CROSBY, MELINDA Name: Name: 12690 BAHIA CT 12250 HAVBURG DR. Address: Address: PENSACOLA, FL 32507 City-St-Zip: City-St-Zip: PENSACOLA, FL 32506 Title: () Delete Title: () Change (X) Addition Name: Name: ANDERSON, RENEE 4700 CONDADO CIRCLE Address: Address: City-St-Zip: City-St-Zip: PENSACOLA, FL 32507

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: SIGNING P 08/07/2009