

# 2011 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N09000000140

FILED  
Jan 07, 2011  
Secretary of State

**Entity Name:** BEERWORKS CHARITABLE FOUNDATION, INC.

**Current Principal Place of Business:**

3798 OLEANDER AVENUE  
SUITE 5  
FORT PIERCE, FL 34982

**New Principal Place of Business:**

564 NE CANOE PARK CIR  
PORT ST LUCIE, FL 34983

**Current Mailing Address:**

3798 OLEANDER AVENUE  
SUITE 5  
FORT PIERCE, FL 34982

**New Mailing Address:**

564 NE CANOE PARK CIR  
PORT ST LUCIE, FL 34983

**FEI Number:** 26-4101716

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

ROBERTS, WILLIAM JR.  
3798 OLEANDER AVENUE  
SUITE 5  
FORT PIERCE, FL 34982 US

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

MARK, CARBONE  
564 NE CANOE PARK CIR  
PORT ST LUCIE, FL 34983 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: MARK CARBONE

01/07/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: D  
Name: BOLAND, MARC  
Address: 564 NE CANOE PARK CIR  
City-St-Zip: PORT ST LUCIE, FL 34983

Title: D  
Name: CARBONE, MARK  
Address: 564 NE CANOE PARK CIR  
City-St-Zip: PORT ST LUCIE, FL 34983

Title: D  
Name: GREENWALD, JOE  
Address: 564 NE CANOE PARK CIR  
City-St-Zip: PORT ST LUCIE, FL 34983

Title: D  
Name: HALBERG, ERIC  
Address: 564 NE CANOE PARK CIR  
City-St-Zip: PORT ST LUCIE, FL 34983

Title: D  
Name: HELLER, GREGORY  
Address: 564 NE CANOE PARK CIR  
City-St-Zip: PORT ST LUCIE, FL 34983

Title: D  
Name: ROBERTS, WILLIAM JR.  
Address: 564 NE CANOE PARK CIR  
City-St-Zip: PORT ST LUCIE, FL 34983

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: MARK CARBONE

D

01/07/2011

Electronic Signature of Signing Officer or Director

Date