2015 FLORIDA NOT FOR PROFIT CORPORATION REINSTATEMENT

FILED
Aug 04, 2015
Secretary of State
CR1595701116

DOCUMENT# N94000004286

Entity Name: FIRST COAST WIND ENSEMBLE, INC.

Current Principal Place of Business:

3842 MUSKET TRAIL
JACKSONVILLE, FL 32277

Current Mailing Address:

3842 MUSKET TRAIL
JACKSONVILLE, FL 32277

FEI Number: 59-3301510

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

REYNOLDS, DONALD L II
813 TRAMBLEY DR. W.
JACKSONVILLE, FL 32221 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: DONALD L. REYNOLDS II 08/04/2015

Electronic Signature of Registered Agent — Date

Officer/Director Detail :

Title	S
Name	SULLIVAN , KYLE
Address	9480 PRINCETON SQUARE BLVD 1104
City-State-Zip:	JACKSONVILLE FL 32256

Title	TD
Name	DONALD, REYNOLDS L II
Address	813 TRAMBLEY DR. W.
City-State-Zip:	JACKSONVILLE FL 32221

Title	D
Name	CLIFTON, ARTIE
Address	3842 MUSKET TRAIL
City-State-Zip:	JACKSONVILLE FL 32277

Title	TREASURER
Name	HAZLET, WILLIAM
Address	45120 OAK TRAIL
City-State-Zip:	CALLAHAN FL 32011

Title	D
Name	SHUGART, LARRY
Address	5216 LOURCEY ROAD
City-State-Zip:	JACKSONVILLE FL 32257

Title	D
Name	MAY, SUSAN
Address	5925 MORSE AVE
City-State-Zip:	JACKSONVILLE FL 32244

Title	D
Name	PAJE, VLADIMIR
Address	7760 ANDES DRIVE
City-State-Zip:	JACKSONVILLE FL 32244

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: ARTIE CLIFTON DIRECTOR 08/04/2015

Electronic Signature of Signing Officer/Director Detail — Date