

# 2014 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# 708315

FILED  
Apr 12, 2014  
Secretary of State

**Entity Name:** THE SUMTER L. LOWRY FOUNDATION, INC.

**Current Principal Place of Business:**

800 WEST AZEELE STREET  
TAMPA, FL 33606 US

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 18065  
TAMPA, FL 336798065 US

**New Mailing Address:**

**FEI Number:** 59-6159389

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

BROWN, ANDREW M  
400 NORTH TAMPA STREET  
SUITE 2300  
TAMPA, FL 33602 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: ANDREW M BROWN

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: BROWN, HELEN M  
Address: 3202 FAIR OAKS AVENUE  
City-St-Zip: TAMPA, FL 33611

Title: D  
Name: MURPHEY, DAVID R. III  
Address: 800 WEST AZEELE STREET, #102  
City-St-Zip: TAMPA, FL 33606

Title: ST  
Name: SNYDER, CAROLINE M  
Address: 3308 SIERRA CIRCLE  
City-St-Zip: TAMPA, FL 33629

Title: D  
Name: HOLTSINGER, KYLE L  
Address: 3308 SIERRA CIRCLE  
City-St-Zip: TAMPA, FL 33629

Title: D  
Name: HOLTSINGER, MATTHEW M  
Address: 3308 SIERRA CIRCLE  
City-St-Zip: TAMPA, FL 33629

Title: D  
Name: BROWN, ANN LOWRY  
Address: 3202 FAIR OAKS AVENUE  
City-St-Zip: TAMPA, FL 33606

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: CAROLINE SNYDER

D

04/12/2014

Electronic Signature of Signing Officer or Director

Date