2006 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT#724226

FILED Oct 11, 2006 Secretary of State

Entity Name: LONGBOAT KEY VOLUNTEER FIRE DEPARTMENT, INC

Current Principal Place of Business: New Principal Place of Business: 5490 GULF OF MEXICO DR LONGBOAT KEY, FL 34228 US **Current Mailing Address: New Mailing Address:** 5490 GULF OF MEXICO DR LONGBOAT KEY, FL 34228 US FEI Number: 59-1919020 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: SIMON, LEWIS B 5490 GULF OF MEXICO DR LONGBOAT KEY, FL 34228 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: LEWIS B. SIMON Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete (X) Change () Addition ALVAREZ, JORGE ALVAREZ, JORGE Name: Name: 4550 47TH ST WEST Address: 4460 87TH STREET COURT WEST Address: City-St-Zip: BRADENTON, FL 34210 City-St-Zip: BRADENTON, FL 34210 Title: () Delete Title: () Change () Addition TYRRELL, MICHAEL T Name: Name: Address: 2309 CANASTA DRIVE Address: City-St-Zip: BRADENTON BEACH, FL 34217 City-St-Zip: Title: () Delete Title: (X) Change () Addition ALTMAN, MATTHEW ALTMAN, MATTHEW Name: Name: 7235 49TH AVE. EAST 6210 ROSEFINCH COURT - #102 Address: Address: City-St-Zip: SARASOTA, FL 34203 City-St-Zip: BRADENTON, FL 34202 Title: () Delete Title: () Change () Addition Name: ANNETT, MARGARET Name: Address: 597 BAYVIEW DR. Address: City-St-Zip: LONGBOAT KEY, FL City-St-Zip: Title: () Delete Title: () Change () Addition GOODRICH, JOHN Q JR Name: Name: 597 BAYVIEW DR. Address: Address: City-St-Zip: LONGBOAT KEY, FL City-St-Zip: Title: () Delete Title: () Change () Addition SIMON, LEWIS Name: Name: Address: 1680 ST JAMES CIRCLE Address: THE VILLAGES, FL 32162 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: LEWIS B. SIMON PRES 10/11/2006