2009 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT#740379

FILED Oct 20, 2009 Secretary of State

Entity Name: THE HOSTS OF BREVARD COUNTY, INCORPORATED **Current Principal Place of Business: New Principal Place of Business:** 776 FLORENCE CIRCLE TITUSVILLE, FL 32780 **Current Mailing Address: New Mailing Address:** 776 FLORENCE CIRCLE TITUSVILLE, FL 32780 US FEI Number: 59-2237071 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: COLE, HERMAN A 776 FLORENCE CIRCLE TITUSVILLE, FL 32780 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: HERMAN A. COLE, JR. Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: **PRES** () Change () Addition () Delete HIGGENS, WILLIAM PRES. Name: Name: 429 MAPLE BLUFF CIRCLE Address: Address: City-St-Zip: MELBOURNE, FL 32940 BR City-St-Zip: Title: SEC. () Delete Title: () Change () Addition Name: JAMES, JACKSON Name: Address: 740 HISBISCUS DRIVE Address: City-St-Zip: SATELLITE BEACH, FL 32937 City-St-Zip: Title: V.P. () Delete Title: () Change () Addition HARVIN, MOSES Name: Name: 1924 JACQUES DRIVE Address: Address: City-St-Zip: MELBOURNE, FL 32940 City-St-Zip: Title: **TRES** () Delete Title: () Change () Addition Name: HERMAN, COLE TRES. Name: Address: 776 FLORENCIA CIRCLE Address: City-St-Zip: TITUSVILLE, FL 32780 City-St-Zip:

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: HERMAN A. COLE, JR. TRES 10/20/2009