

2005 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# 743463

FILED
Jul 26, 2005
Secretary of State

Entity Name: FLORIDA DIRECT MARKETING ASSOCIATION, INCORPORATED

Current Principal Place of Business:

1951 NW 19 STREET
BOCA RATON, FL 33431 US

New Principal Place of Business:

1100 SW 5TH STREET
BOCA RATON, FL 33486 US

Current Mailing Address:

1951 NW 19 STREET
BOCA RATON, FL 33431 US

New Mailing Address:

1100 SW 5TH STREET
BOCA RATON, FL 33486 US

FEI Number: 59-2489368 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**
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:

FILHABER, DALE T
PO BOX 970123
BOCA RATON, FL 334970123 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: DALE T. FILHABER

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: CD () Delete
Name: DUNHILL, ROBERT
Address: 1951 NW 19TH STREET
City-St-Zip: BOCA RATON, FL 33431

Title: P () Delete
Name: FILHABER, DALE
Address: PO BOX 970123
City-St-Zip: BOCA RATON, FL 33497

Title: TD () Delete
Name: HACHENBURG, RICHARD
Address: 9593 TAVERNIER DR
City-St-Zip: BOCA RATON, FL 33496

Title: SD (X) Delete
Name: GRISDELA, MARGARET
Address: PO BOX 273348
City-St-Zip: BOCA RATON, FL 33427

Title: V (X) Delete
Name: KASHER, GEOFF
Address: 7280 W PALMETTO PARK RD #110
City-St-Zip: BOCA RATON, FL 33433

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: MARGARET, GRISDELA P
Address: 1100 SW 5TH STREET
City-St-Zip: BOCA RATON, FL 33486

Title: T (X) Change () Addition
Name: HACHENBURG, RICHARD T
Address: 9593 TAVERNIER DR
City-St-Zip: BOCA RATON, FL 33496

Title: D (X) Change () Addition
Name: A'HEARN, JASON D
Address: 13 W. LAS OLAS BOULEVARD
City-St-Zip: FORT LAUDERDALE, FL 33301

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: MARGARET GRISDELA

P

07/26/2005

Electronic Signature of Signing Officer or Director

Date