2005 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT#750176

FILED Sep 16, 2005 Secretary of State

Entity Name: FLORIDA ADVISORY COMMITTEE ON ARSON PREVENTION, INC.

Current P	rincipal Place of Business:	New Principal Place of Business:
PO BOX 1 WINTER F	654 PARK, FL 327901654	
Current Mailing Address:		New Mailing Address:
PO BOX 1654 WINTER PARK, FL 327901654		3625 NW 82ND AVENUE SUITE 306 MIAMI, FL 33166
n accordan	: 59-1743445 FEI Number Applied For() ice with s. 607.193(2)(b), F.S., the corporation di I Address of Current Registered Agent	·
B625 NW BUITE 306 MIAMI, FL	33166 US	
	e named entity submits this statement for t e of Florida.	he purpose of changing its registered office or registered agent, or bot
SIGNATU	RE: DAVID COWHEARD	<u> </u>
	Electronic Signature of Registered	Agent Date
OFFICERS AND DIRECTORS:		ADDITIONS/CHANGES TO OFFICERS AND DIRECT
ītle: lame: lddress: Dity-St-Zip:	D () Delete POPKIN, LORI 600 N PINE ISLAND RD, SUITE 400 PLANTATION, FL 32751	Title: () Change () Addition Name: Address: City-St-Zip:
ītle: lame: lddress: Dity-St-Zip:	D () Delete FIELDS, MARY 200 EAST GAINES STREET TALLAHASSEE, FL 32399	Title: () Change () Addition Name: Address: City-St-Zip:
itle: lame: ddress: city-St-Zip:	D () Delete KEEBLER, KENNETH 1901 CAPRI ROAD VALRICO, FL 33594	Title: () Change () Addition Name: Address: City-St-Zip:
ïtle: lame:	D () Delete ROOT, DAVID 13930 LYNMER BLVD TAMPA, FL 33626	Title: () Change () Addition Name: Address: City-St-Zip:
ddress: city-St-Zip:		Title: () Ohenne () Addition
	D () Delete WATSON, BILL 11331 SAN JOSE BLVD JACKSONVILLE, FL 32223	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.

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SIGNATURE:	DAVID COWHEARD	D	09/16/2005