

**2004 NOT-FOR-PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# 752431

**FILED**  
**Oct 20, 2004**  
**Secretary of State****Entity Name:** FLORIDA STATE ASSOCIATION OF PORCELAIN ARTISTS, INC.**Current Principal Place of Business:**1800 SECOND ST  
S717  
SARASOTA, FL 342365901**New Principal Place of Business:**3823 NE 19TH STREET CIRCLE  
OCALA, FL 34470-493**Current Mailing Address:**1800 SECOND ST  
S717  
SARASOTA, FL 342365901**New Mailing Address:**3823 NE 19TH STREET CIRCLE  
OCALA,, FL 344704937**FEI Number:** 59-2096345      **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:**MCLAIN, GEORGE R.  
1800 SEOND ST  
S717  
SARASOTA, FL 33578 US**Name and Address of New Registered Agent:**JENTA R. WYATT  
3823 NE 19TH STREET CIRCLE  
OCALA, FL 34470 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: JENTA R. WYATT

10/20/2004

\_\_\_\_\_  
Electronic Signature of Registered Agent\_\_\_\_\_  
Date**OFFICERS AND DIRECTORS:****Title:** P      ( ) Delete  
**Name:** SULLIVAN, CORLISS  
**Address:** 4180 ROLLING OAKS  
**City-St-Zip:** WINTER HAVEN, FL 33880**Title:** VP      ( ) Delete  
**Name:** KENWORTHY, RUTH  
**Address:** 5175 SIESTA WOODS DR.  
**City-St-Zip:** SARASOTA, FL 34242**Title:** RS      ( ) Delete  
**Name:** CAMPBELL, BETTY  
**Address:** 4633 FOREST WOOD TRAIL  
**City-St-Zip:** SARASOTA, FL 342416111**Title:** CS      ( ) Delete  
**Name:** STOLLER, COLLEEN  
**Address:** 4409 OAK VIEW DR.  
**City-St-Zip:** SARASOTA, FL 34242**Title:** T      ( ) Delete  
**Name:** WYATT, JENTA R  
**Address:** 3823 NE 19TH STREET CIRCLE  
**City-St-Zip:** OCALA, FL 34470**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** P      (X) Change ( ) Addition  
**Name:** CORK, HELEN I  
**Address:** 1407 HESTER DRIVE  
**City-St-Zip:** LAKE LAND, FL 33801**Title:** VP      (X) Change ( ) Addition  
**Name:** FRANKLIN, SUE  
**Address:** 1585 BOCA RIO DRIVE  
**City-St-Zip:** VIERA, FL 32940**Title:** RS      (X) Change ( ) Addition  
**Name:** CARROLL, SHIRLEY  
**Address:** 3481 HIGHWAY 83 NORTH  
**City-St-Zip:** DEFUNIAK SPRINGS, FL 32433**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: JENTA R. WYATT

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10/20/2004

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director\_\_\_\_\_  
Date