2009 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT#758682

FILED Jun 07, 2009 Secretary of State

Entity Name: NORTH PALM BEACH VOLUNTEER FIRE DEPARTMENT, INC.

Current Principal Place of Business: New Principal Place of Business:

560 U.S. HIGHWAY ONE

NORTH PALM BEACH, FL 33408 LIS

Current Mailing Address: New Mailing Address:

POST OFFICE BOX 13071 NORTH PALM BEACH, FL 33408

FEI Number: 65-0389579 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:

GIARRUSSO, PETER A PEDUZZI, JOSEPH A ESQ. 1415 10TH STREET 9889 DOGWÓOD AVENUE PALM BEACH GARDENS, FL 33410 LAKE PARK, FL 33403 US 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: JOSEPH A. PEDUZZI, ESQ

06/07/2009 Date

Electronic Signature of Registered Agent

OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

DV (X) Change () Addition () Delete

PEDUZZI, JOSEPH A PEDUZZI, JOSEPH A Name: Name: 2321 23RD LANE Address: 560 U.S. HIGHWAY ONE Address:

City-St-Zip: PALM BEACH GARDENS, FL 33418 City-St-Zip: NORTH PALM BEACH, FL 33408

Title: () Delete Title: (X) Change () Addition

GIARRUSSO, PETER A Name: GIARRUSSO, PETER A Name: Address: 9889 DOGWOOD AVENUE Address: 560 U.S. HIGHWAY ONE

City-St-Zip: PALM BEACH GARDENS, FL 33410 City-St-Zip: NORTH PALM BEACH, FL 33408

Title: (X) Delete Title: () Change () Addition

WINEWSKI, FRANK Name: Name: 5923 GOLDEN EAGLE CIRCLE Address: Address: City-St-Zip: PALM BEACH GARDENS, FL 33418 City-St-Zip:

() Delete Title: DS Title: DS (X) Change () Addition

GIARRUSSO, LOUIS A GIARRUSSO, LOUIS A Name: Name: Address: 945 FIRETREE DRIVE Address: 560 U.S. HIGHWAY ONE City-St-Zip: NORTH PALM BEACH, FL 33408 City-St-Zip: NORTH PALM BEACH, FL 33408

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: JOSEPH A. PEDUZZI, ESQ. DV 06/07/2009