

2004 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# 766103

FILED
Nov 03, 2004
Secretary of State**Entity Name:** VOITURE LOCALE #199, INC., LA SOCIETE DES 40 HOMMES ET 8 CHEVAUX**Current Principal Place of Business:**2119 W. GRAY ST.
TAMPA, FL 33606**New Principal Place of Business:****Current Mailing Address:**2119 W. GRAY ST.
TAMPA, FL 33606**New Mailing Address:****FEI Number:** 59-0780836**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**TAYLOR, J. G., JR.
16113 ARMISTEAD LANE
ODESSA, FL 33556 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:

Electronic Signature of Registered Agent_____
Date**OFFICERS AND DIRECTORS:****Title:** D () Delete
Name: FOSTER, MONSCA
Address: 4406 E SLIGH AVE
City-St-Zip: TAMPA, FL 33610**Title:** P () Delete
Name: LITTLE, RICHARD W
Address: 3713 ANCHOR DR.
City-St-Zip: TAMPA, FL 336114802**Title:** TD () Delete
Name: TAYLOR, J. G., JR.
Address: 16113 ARMISTEAD LN
City-St-Zip: ODESSA, FL 335563304**Title:** D () Delete
Name: HALL, DANIEL W, JR.
Address: 3614 OKLAHOMA AVE
City-St-Zip: TAMPA, FL 33611**Title:** D () Delete
Name: DELONG, DAVID E,
Address: 4711 EL PRADO BLVD
City-St-Zip: TAMPA, FL 33629**Title:** D () Delete
Name: KERENS, JAMES E
Address: 4406 W JEAN STREET
City-St-Zip: TAMPA, FL 33614**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** () Change () Addition
Name:
Address:
City-St-Zip:**Title:** () Change () Addition
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Name:
Address:
City-St-Zip:**Title:** D (X) Change () Addition
Name: HOLLEY, ALLEN S
Address: 6906 N. WILLOW AV.
City-St-Zip: TAMPA, FL 33604

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: J. G. TAYLOR, JR.

TD

11/03/2004

Electronic Signature of Signing Officer or Director_____
Date