## 2008 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

**DOCUMENT#768846** 

FILED Aug 29, 2008 Secretary of State

Entity Name: FORT MYERS-LEE COUNTY YOUTH BASKETBALL ASSOCIATION, INC.

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

9675 SPRING RIDGE CIRCLE ESTERO, FL 33928

Current Mailing Address: New Mailing Address:

9675 SPRING RIDGE CIRCLE ESTERO, FL 33928

FEI Number: 59-2326257 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: Name and Address of New Registered Agent:

DONMOYER, JAMES 9675 SPRING RIDGE CIR ESTERO, FL 33928 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: JAMES DONMOYER

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Fitle: PD ( ) Delete Title: D (X) Change ( ) Addition

 Name:
 DONMOYER, JAMES
 Name:
 DONMOYER, JAMES

 Address:
 9675 SPRING RIDGE CIRCLE
 Address:
 9675 SPRING RIDGE CIRCLE

City-St-Zip: ESTERO, FL 33928 City-St-Zip: ESTERO, FL 33928

Title: D/VP ( ) Delete Title: PD (X) Change ( ) Addition Name: BENNETT, DAVID Name: DONABED, GARY

 Address:
 8814 FORDHAM AVE.
 Address:
 1721 SW 23RD STREET

 City-St-Zip:
 FT. MYERS, FL 33907
 City-St-Zip:
 CAPE CORAL, FL 33991

Title: DST () Delete Title: DVP (X) Change () Addition
Name: SHIPLEY, GERALD K Name: WAGNER, ROBERT

Address: 13732 PINE VILLA LANE Address: 6237 PRESIDENTIAL COURT UNIT D

City-St-Zip: FORT MYERS, FL 33912 US City-St-Zip: FORT MYERS, FL 33919 US

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

Name: SHIPLEY, BRAD Name: SHIPLEY, BRAD
Address: 16143 MOUNT ABBEY WAY Address: 16143 MOUNT ABBEY WAY

City-St-Zip: FT. MYERS, FL 33908 US City-St-Zip: FT. MYERS, FL 33908 US

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

Name: Name: FLYNN, RODNEY

 Address:
 Address:
 1423 SE 16TH PLACE UNIT 102

 City-St-Zip:
 City-St-Zip:
 CAPE CORAL, FL 33990 US

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: RODNEY FLYNN DT 08/29/2008